STEWART LEE KARLIN LAW GROUP, P.C.

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ALANDRE GONEL,

UNITED STATES DISTRICT COURT DISTRICT OF NEW JERSEY

:

Plaintiff,

v. : Civil Action No.:

ESSEX COUNTY COLLEGE : <u>COMPLAINT WITH JURY DEMAND</u>

:

Defendant. :

Plaintiff Alandre Gonel, through his attorneys, Daniel Dugan, Esq. Stewart Lee Karlin Law Group, P.C., complaining of the Defendant, states as follows:

NATURE OF THE ACTION

- This action seeks damages, injunctive relief, attorneys' fees, and other appropriate
 equitable and legal relief on behalf of Plaintiff as a result of Defendant's violation of his
 civil rights.
- 2. This action is brought to remedy discrimination on the basis of race and national origin pursuant to Title VI of the Civil Rights Act of 1964, 42 U.S.C. §2000(d), et seq. ("Title VI") and Title IX Education Amendments of 1972, 20 U.S.C. 1681, et seq. or any other cause(s) of action that can be inferred from the facts set forth herein.

- 3. Defendant is under a duty not to engage in invidious racial and national origin discrimination or practices which discourage enrollment or involvement of other-race persons. As hereinafter shown, Plaintiff is a member of a protected class and beneficiary of this non-discrimination mandate. As further shown herein, Defendant has breached their duty of non-discrimination.
- 4. The Plaintiff also brings this action for slander.

JURISDICTION AND VENUE

- 5. This Court has jurisdiction over this action pursuant to 28 U.S.C. § 1331 and Title VI, 42 U.S.C. §2000(d), et seq.
- 6. Venue is proper pursuant to 28 U.S.C. §1391.

THE PARTIES

7. Plaintiff GONEL ALANDRE (hereinafter at all times referred to as "Plaintiff") was duly enrolled at Essex County College. Defendant Essex County College (hereinafter at all times referred to as "Defendant") is a college and is a recipient of federal, state, and local government grants, loans, etc., and is within the jurisdiction of this Court.

FACTUAL STATEMENT

- 8. Plaintiff Gonel Alandre is a 48-year-old black male of Haitian descent with a discernable accent. Like many other residents in Haiti, due to the lack of economy, Plaintiff did not have the opportunity to obtain a college degree in his country. Knowing that a college degree can significantly increase one's chances in the job market, he strived to obtain one at Essex County College.
- 9. Plaintiff has been a student at Essex County College for over ten years.

- 10. In May 2017, Plaintiff graduated from Essex County College as a biology pre-med student, as his goal was to become a Physician Assistant.
- 11. After graduating, Plaintiff could not find a job with such a degree. He ended up working as a lavatory worker at Newark airport. This consisted of receiving and disposing of urine and feces from airplanes. Consequently, Plaintiff decided to go back to school for another degree.
- 12. In May 2018, Plaintiff applied and was accepted to Bloomfield College, a four-year program.
- 13. Unfortunately, he could not afford the tuition. Therefore, he went back to Essex County College and enrolled in the LPN nursing program, where he successfully passed the entrance exam and, subsequently, all his nursing classes with an A grade or B.
- 14. Thereafter, Plaintiff successfully passed the LPN State Board exam.
- 15. In 2022, Plaintiff started the LPN to RN bridge program at Essex County College where he successfully completed the first term.
- 16. During the second trimester, Plaintiff and Dr. Gale Gage, the Chairperson of the Department of Nursing at Essex County College, had a verbal argument over a class schedule.
- 17. Because of this argument, Dr. Gage retaliated against Plaintiff by misusing the power of her position as Chairperson to impugn Plaintiff's reputation as a student, and subsequently, expel him from the entire nursing program without reasonable justification.
- 18. "Shut your mouth if you want to pass the course," said professor Colin Archer to the Plaintiff

- 19. On Wednesday, March 23, 2022, at approximately 8:35-9:00 p.m., two days after the verbal argument between the Plaintiff and Dr. Gale Gage, professor Colin Archer, a white male, whom the Plaintiff had never met before, asked the Plaintiff to meet with him after their first clinical class and asked him: "What's going on with you and Dr. Gage?" This occurred after professor Colin Archer and another professor named Jennifer Chapman had a meeting with Dr. Gage early that day.
- 20. When the Plaintiff asked professor Archer what Dr. Gage had said about him, he replied, "She didn't say anything bad." Then he continued to say to the Plaintiff, "Mr. Gonel, the RN program is a big step for you. If you want to pass the course, "shut your mouth."
- 21. Although, as a Good Samaritan, professor Archer wanted to warn my client of the forthcoming, based on what he heard from Dr. Gage, instruct my client to shut his mouth so he would have a chance of passing the NRS 111 course, was clearly, an inappropriate statement by professor Archer toward a student.
- 22. This statement also reflects that defamatory statements must have been made against my client.
- 23. Both professor Archer and Dr. Gage appeared to treat Plaintiff differently due to being a black male Haitian nursing student.
- 24. In the case at hand, Plaintiff has obtained a final grade of 72.81 in the NRS 111 course, at Essex County College. A grade of 75 was the minimum required passing grade. Thus, Plaintiff has failed the course by about 2 points, even though he has never failed a nursing course before.

- 25. After obtaining the 72.81 for the NRS111 course, Plaintiff went and explained his school situation to Dean Alvin Williams, the Executive Dean of Faculty and Academic Affairs at Essex County College. Plaintiff begged Dean Williams for help because he wanted to move forward while explaining to him the extraordinary stress he had been placed under.
- 26. After over a month of going back and forth to Dean Williams' office, in a sarcastic smile, Dean Williams laughed at the Plaintiff and said, "How would you take care of my grandmother if I gave you the 2 points you asked me?" Then, Dr. Williams instructed the Plaintiff to file a grade appeal instead.
- 27. Again, a comment such as this and such behavior from the Executive Dean of Faculty and Academic Affairs reflects a bias since Plaintiff is a male Haitian black with a discernable accent.
- 28. Plaintiff then went, and spoke to several school officials about his predicament, and asked them for help. Plaintiff spoke to Dr. Genevieve Danville, Associate Professor, and Division of Nursing & Health Sciences. He spoke to Dr. Eunice Kamunge, Chairperson and Professor in the Division of Biology, Chemistry & Physics. He spoke to Ms. Kathlyn Battle, Associate Professor and Counselor, and then Mr. Anthony Cromartie, Chief of Police at Essex County College, Police Department.
- 29. Mr. Anthony Cromartie, Chief of Police at Essex County College, Police Department as mentioned above, set a meeting with one of the school officials, Mr. Mohamed Seddiki, Executive Dean / Chief Information Officer (CIO) to find a solution to Plaintiff's situation. Mr. Seddiki then escalated the situation to Mr. Jalloh Pavi, Special Assistant to the President of Essex County College, who in turn escalated the situation to the school President, Mr. Boakye Augustine.

- 30. Such an escalation up to the President of the school in connection with a single course's grade reflects a bias since Plaintiff is a male Haitian black with a discernable accent.
- 31. On behalf of Mr. Boakye, President of Essex County College, Mr. Jalloh, Special Assistant to the President, sent an email to the Plaintiff and stated that the President of Essex County College had requested Dr Alvin Williams, Dean of Academic Affairs, to contact the Plaintiff for a resolution. However, Dr. Alvin Williams ignored the President's request and chose not to meet with the Plaintiff. (See email dated November 30, 2022, attached hereto as Exhibit "A").
- 32. This arranged rejection reflects a bias since Plaintiff is a male Haitian black with a discernable accent.
- 33. Since the only option given to the Plaintiff was to file a grade appeal, he did so.
- 34. After initiating the grade appeal process, on or about August 22, 2022, Dr. Gage, the Chairperson of the Department of Nursing at Essex County College, arbitrarily canceled the grade appeal process with no regard for Essex County College Grade Appeal Regulations and Guidelines because the Plaintiff requested to have an "in-person meeting," instead of the zoom meeting granted to him as the only appeal meeting he was allowed to have. (See email dated August 22, 2022, attached hereto as Exhibit "B").
- 35. This was a violation of the school's policies and procedures, as nothing in the school handbook states that "student appeal meetings" must be held via Zoom, especially if a special request is made for them to be in person (See Essex County College, College Regulation REG 6-9 Student Grade Appeal, attached hereto as exhibit "C").
- 36. This arbitrary cancellation of the grade appeal reflects a bias since Plaintiff is a male Haitian black with a noticeable accent.

- 37. Thus, Plaintiff was forced to hire a private attorney despite his limited resources.
- On or about September 26, 2022, after the intervention of the Plaintiff's attorney, the school reinstated the Plaintiff's grade appeal for the second time. (See letter dated September 7, 2022, attached hereto as Exhibit "D").
- 38. After reinstating Plaintiff's grade appeal, Defendant directed Plaintiff to meet with faculty members and then appear at various meetings in which his attorney was not allowed to attend.
- 39. Regarding Plaintiff's grade, after carefully reviewing the syllabus, or one of the syllabi given to him, Plaintiff noticed a few miscalculations that were made by the two core teachers, Professor Natalee Write-Smith (Lecturer in Med/Surg), and Jennifer Chapman (Lecturer in Mental Health). Plaintiff has also noticed an unfair process in determining his final grade. When he brought the matter to the school's attention, the school turned a deaf ear to his complaints. (See syllabi, attached hereto as: Spring 2022, Syllabus Version 1, page 6 as Exhibit "E"; Spring 2022, Syllabus Version 2, page 6 as Exhibit "F"; Syllabus <u>Version 3</u>, page 6 as Exhibit "G"; and <u>Syllabus Version 4</u>, page 6 as Exhibit "H").
- 40. Among mistakes made by the two main teachers, Professor Natalee and Professor Chapman, in calculating the Plaintiff's overall final grade are:
 - Omitting points
 - Replacing earned points with a lower grade
 - Point count error
 - Inability to explain wrongdoing
 - Too many syllabi for one course

41. After a careful review of one of the syllabi given to the Plaintiff, the Plaintiff noticed that Professor Natalee had omitted 3 points that the Plaintiff has earned on the ATI Mental Health Proctored Exam, as mentioned in one of the syllabi given to him when calculating Plaintiff's final grade. When the Plaintiff claimed these 3 points, for achieving Level 2 on the ATI proctored exam for mental health, both professor Natalee and professor Chapman replied that there was no points for this exam, although one of the syllabi provided to my client clearly states what level a student must achieve on this proctored exam to earn additional points. (See ATI Proctored Exam, Individual Cut Score Required for Proficiency Points listed in Exhibit "E" Syllabus Version 1, Page 6, Paragraph 4, Line 3).

ATI Proctored Examination (Mental Health).

Individual Cut Score Required for Proficiency Points

Level 3: 85.0 % - 100.0 % 5 points

Level 2: 66.7 % - 83.3 % 3 points

Level 1: 56.7 % - 65.0 % 1 points

Below level 1: below 56.7 % 0 points

In the case at hand, Plaintiff has obtained 73.3 on the ATI Proctored Exam for mental health, thus reaching level 2, based on the ATI's Cut Score Required for Proficiency Points, listed above. (See Plaintiff's ATI Proctored Exam result for Mental Health, attached hereto as Exhibit "I").

42. Therefore, the additional 3 points, as indicated in one of the syllabi given to the Plaintiff, should have been added to his comprehensive final grade of 72.81. That alone would have given him a score of 75.81, which was more than enough to pass the course. Therefore, Case 2:25-cv-00950-SDW-JSA

43. Plaintiff has obtained **72.2** on the ATI comprehensive final exam, however, the two core professors replaced his grade with a **72.17** to calculate his overall final grade. (See ATI Comprehensive Final Exam result, attached hereto as Exhibit "J").

This exhibit shows the Plaintiff's actual grade on the ATI platform for the final comprehensive exam compared to what the school gave him as final grade, as shown on page 7 of the Assignment Grade Breakdown.

- 44. The addition of the following decimal numbers below also shows another point counting error made by the two main Professors, professor Natalee and professor Chapman in calculating the assignment grade average of my client.
 - -0.23 + 0.23 + 0.21 + 0.23 + 0.20 + 0.19 + 0.23 + 0.20 + 0.23 + 0.20 + 0.23 + 0.20 + 0.20 +0.22 + 0.23 + 0.21 + 0.23 + 0.21 + 0.23 + 0.23 = 4.34
- 45. When added all the decimals above, the result should have been 4.34. However, professor Natalee and Chapman, used 4.29 instead of 4.34 to calculate the Plaintiff's assignment grade average. (See the grade used on the Performance Review Sheet by professor Natalee and professor Chapman to calculate Plaintiff's assignment grade, attached hereto as Exhibit "K").
- 46. The decimal numbers shown above correspond to the cumulative grade located in the farright corner of page 2 to page 6 of the Assignment Grade Breakdown in the <u>Contribution</u> to Course Total section presented in Exhibit L.
- 47. After the Plaintiff's grade appeal had been reinstated, during one of the meetings with the two core teachers, professors Natalee in Med/Surg and Chapman in Mental Health,

Plaintiff requested his grades for mental health assignments since the grades presented in the assignment grade average indicated above were mainly awarded by Professor Natalee for the med/surg course. Professor Chapman replied, "Mr. Gonel, I gave you the whole 5% credit as stated in the syllabus." However, the grade breakdown for assignments provided by the two core professors showed that Plaintiff has only received 0.23 point in total for mental health assignments. However, professor Jennifer Chapman claimed that she gave the Plaintiff the full 5%, as mentioned in her syllabus. (See Plaintiff's grade in the Assignments Grade Breakdown, attached hereto as Exhibit "L").

- 48. The two main teachers were unable to explain the 0.23 point given to the Plaintiff as total grade for the mental health assignments section.
- 49. Thereafter, Plaintiff emailed Dr. Gage, and suggested a math teacher be present at the next meeting since the two core teachers were unable to explain these mistakes. Dr. Gage, the Chairperson of the Department of Nursing, as mentioned earlier, ignored the Plaintiff's suggestion as if these errors were insignificant. (See email dated September 29, 2022, suggesting a math teacher be present at the next Grade Appeal meeting, attached hereto as Exhibit "M").
- 50. This conduct from Dr. Gale Gage reflects a bias since the Plaintiff is a male Haitian black with a discernable accent.
- 51. As mentioned earlier, the grade average for assignments was mainly based on med/surg. When carefully reviewing the assignment's grade breakdown, Plaintiff noticed that he had received a total of 4.11 points from professor Natalee for med/surg assignments.
- 52. Given that Professor Chapman claimed to have awarded the Plaintiff the full 5% credit for mental health assignments, as stated in her syllabus, then by adding her 5 % credit, for

mental health assignments, to professor Natalee's 4.11% credit, for med/surg assignments, the total score came up to 9.11 points for both med/surg and mental health assignments combined.

- 5 + 4.11 = 9.11 according to the rule of addition.
- 53. The two core teachers, professor Natalee and professor Chapman, argued that Plaintiff could only receive 5% credit for total assignments. However, neither one wanted to acknowledge their mistake, and the issue caused by the different version of syllabi handed to the Plaintiff. (See Exhibits "E" - "H").
- 54. During the grade appeal meeting, Plaintiff pointed out that he had received four different syllabi for the same NRS111 course: two from professor Natalee White-Smith in med/surg, one from professor Jennifer Chapman in Mental Health, and one from Dr. Gale Gage. Each of these syllabi listed its own grading process.
- 55. The number of syllabi given to Plaintiff and presented at the grade appeal meeting made it impossible for the two core teachers, professor Natalee and professor Chapman, and the committee grade appeal to discern the mathematical error in calculating Plaintiff's grade. Discernable differences in the syllabi can be seen when comparing (See Exhibits "E" - "H).
- 56. For this reason, Dr. Gennevieve Danville, one of the members of the Divisional Grade Appeal Committee, said:

"There is no concrete argument; because the Plaintiff got one syllabus from Dr, Gage, two syllabi from professor Natalee, and one syllabus from professor Chapman.....Right there that was ground to throw the case out in a court."

57. As set out below, Plaintiff's overall final grade is 80.58 taking into account errors made by the two core teachers, professor Natalee and professor Chapman, in calculating his grade.

- Unit Exam Total Assignments ATI Proctored Exam Final Exam Final grade

 43.2 + 9.11 + 3 + 25.27 = 80.58
- 58. After carefully adding up the total points earned, including the above calculation errors, Plaintiff's overall final grade came up to 80.58, more than 5 points above the 75 required to pass the course.
- 59. Instead of taking into account the Plaintiff's claims, on or about March 24, 2023, the school emailed the Plaintiff a one-paragraph letter that simply stated that after a careful examination, the committee had voted unanimously not to change the Plaintiff's grade with no rationale in the letter explaining why the College has refused to recalculate the clear mathematical error made in calculating the Plaintiff's grade. (See the March 24, 2023 letter attached hereto as Exhibit "N").

Note. I would like to point out that the <u>80.58</u> points constituting the Plaintiff's final score were therefore calculated based on the numerous syllabi given to him and presented at the grade appeal meeting as well. Yet the school arbitrarily expelled the Plaintiff from the entire nursing program and offered no relief whatsoever.

- 60. The school's conduct reflects a bias since the Plaintiff is a male Haitian black with a discernable accent.
- 61. After the school arbitrarily expelled the Plaintiff from the nursing program, in a private meeting with Dr. Eunice Kamunge, one of the four members of the College-wide Grade Appeal Committee, Dr. Gennevieve Danville, one of the three members of the Divisional Grade Appeal Committee, and the Plaintiff, Dr. Danville said:

"It's almost an insult to them, the grievance committee because the school did not acknowledge their decision since the Plaintiff was not at fault." She added: "...So whatever the grievance committee said Doesn't it matter?" And continue to say: "if the school knew they

wouldn't even listen to the grievance committee why even bring the matter to them?"

- 62. The only option Dr. Gale Gage, the Chairperson of the Department of Nursing, offered the Plaintiff was to retake the final exam instead of considering the mathematical error in calculating his grade, which clearly demonstrated that my client had successfully completed the NRS111 course. (See the October 24, 2022, letter attached hereto as Exhibit "O").
- 63. During the private meeting mentioned above with Dr. Kamunge and Dr. Danville, and the Plaintiff, Dr. Kamunge, in agreement with Dr. Danville, said to the Plaintiff, "Asking you (the Plaintiff) to retake the final exam was a set-up."
- 64. As mentioned earlier, Dr. Kamunge, one of the four members of the College-Wide Grade Appeal Committee, avowed to Dr. Danville and the Plaintiff that Dean Alvin Williams, the Executive Dean of Faculty and Academic Affairs for Essex County College, and the meeting leader of the College-wide Grade Appeal, invited her to the meeting only 20 minutes before the meeting started. She also stated that she did not know what was going on during the meeting because the attendees were not explicit.
- 65. Dr. Alvin Williams, the Executive Dean of Faculty and Academic Affairs, and the meeting leader of the College-wide Grade Appeal Committee, did not intend to invite a member of the Division of Biology, Chemistry, and Physics to the College-wide Grade Appeal Committee meeting as outlined in Step 5 of Essex County College, College Regulation REG 6-9 STUDENT GRADE APPEAL. (See Exhibit "C" Essex County College, College Regulation REG 6-9 Student Grade Appeal).

- 67. For a fair process, Essex County College, College Regulation REG 6-9 STUDENT GRADE APPEAL stated: One faculty member from each academic division should be present during the College-wide Grade Appeal Committee meeting. However, Dr. Alvin Williams, the Executive Dean of Faculty & Academic Affairs and the meeting leader of the College-wide Grade Appeal, deliberately decided not to follow the school policies and the Grade Appeal guidelines.
- 68. Although Essex County College, College Regulation REG 6-9 STUDENT GRADE APPEAL clearly stated faculty members who must be present at the College-wide Grade Appeal Committee meeting, Dr. Alvin Williams has decided not to invite to the College-Wide Grade Appeal Committee meeting
 - A member of the Division of Mathematics, Engineering Technologies & Computer Sciences Department.
 - A member of the Division of Social Sciences
 - Last but not least, a member of the Division of Business.
- 69. Dean Alvin Williams did not bother to invite the Dean of Students, Dr. Keith Kirkland, or his designee to the College-wide Grade Appeal Committee meeting.
- 70. This was a violation of the school's policies and procedures, as the school handbook highlights step-by-step instructions on how the College-wide Grade Appeal Committee should proceed. (See Exhibit "C" Essex County College, College Regulation REG 6-9 Student Grade Appeal).

- 71. In addition to faculty members who must be present at the College-wide Grade Appeals Committee meeting, Essex County College, College Regulation REG 6-9 STUDENT GRADE APPEAL set a time limit for holding the meeting, and communicating the outcome of the meeting, which is within "ten days." (See Exhibit "C" Essex County College, College Regulation REG 6-9 Student Grade Appeal).
- 72. However, Dr. Alvin Williams deliberately took about four months (Nov 28, 2022 March 15, 2023) to schedule the College-wide Grade Appeal meeting. This appears to be a very clear and blatant effort by Dean Williams to evade the College Regulation REG 6-9 STUDENT GRADE APPEAL time rule.
- 73. As Executive Dean of Faculty and Academic Affairs at Essex County College, Dr. Alvin Williams' decision to ignore the request of the President of the school, as set forth in paragraph 31, to deliberately violate the school's policies and procedures regarding student grade appeal process, to stall the College-wide Grade Appeal hearing to four months later albeit the time frame to schedule a meeting, and to communicate the outcome of the meeting is clearly stated in Essex County College, College Regulation REG 6-9 Student Grade Appeal, clearly indicate that Dr. Alvin Williams couldn't care less about the student's academic and professional career
- 74. This conduct from Dean Alvin Williams reflects a bias since Plaintiff is a male Haitian black with a discernable accent.
- 75. Here, it was a draconian penalty to expel the Plaintiff without reasonable justification, for the Plaintiff's grade was miscalculated, and the school refused to review whether the grade was miscalculated despite the issues caused by the number of syllabi given to the Plaintiff and presented during the appeal meetings. Furthermore, Plaintiff suggested that a math

- teacher be present during the appeal meetings since these errors were not discretionary but mathematical, but Plaintiff's suggestion was ignored.
- 76. To twist the knife in the wound, the NRS 111 Spring 2022 Comprehensive Final Exam took place on July 7, 2022. (See Exhibit "J" ATI Comprehensive Final Exam Result for details). On July 9, 2022, the result of the comprehensive final exam was communicated to my client. (See email dated July 9, 2022, attached hereto as Exhibit "P"). After informing my client that based on his final course score of 72.81, he has failed NRS 111 course, to ridicule my client, Professor Chapman (Lecturer in Mental Health) asked him to submit a 32-page assignment by July 12, 2022; if not submitted by the due date, the assignment will not be graded.
- 77. Without questioning Professor Chapman's motives in asking the Plaintiff to submit this assignment, three days after informing him that he had failed the course, and asked him to meet with the Program Chairperson to determine eligibility for one-time-only readmission to the generic RN program, the Plaintiff pushed himself, amid his frustration and discontent to complete and submit the assignment by the requested date. (See homework required to submit by July 12, 2022, as Exhibit "Q") Despite submitting the assignment on the due date, the Plaintiff received a grade of zero for the assignment. When the Plaintiff asked Professor Chapman why he received a zero for an assignment, Professor Chapman responded that there was no grade associated with the assignment.
- 78. On or about March 14, 2024, the Plaintiff's counsel sent a letter to Christine A. Soto, General Counsel for Essex County College, addressing the Plaintiff's aforementioned concerns with how the College-Wide Grade Appeal Committee conducted the grade appeal process. (See the March 14, 2024, letter attached hereto as Exhibit "R"). Christine

- A. Soto, General Counsel for Essex County College, as mentioned earlier, chose not to respond to the Plaintiff's attorney even after the Plaintiff's attorney repeatedly emailed and asked the school's General Counsel to acknowledge receipt of the letter.
- 79. On or about April 22, 2024 (39 days later), the Plaintiff's attorney had to send the March 14, 2024, letter a second time to Christine A. Soto, and asked Ms. Christine to acknowledge receipt of the letter (See FedEx Advanced Shipment Tracking and Delivery date March 15, 2024, as Exhibit "S", and April 23, 2024, as Exhibit "T").
- 80. Instead of replying to the letter sent by the Plaintiff's attorney, on or about May 2, 2024 (49 days later,) the school, or Essex County College sidelined its general counsel, Ms Christine A Soto, and hired an outside law firm (CARMAGNOLA & RITARDI, LLC, Attorneys at Law) to intimidate the Plaintiff, by sending to the Plaintiff's attorney office a cease and desist letter, and asked the Plaintiff to quit contacting anyone at Essex County College. (See letter dated May 2, 2024, from CARMAGNOLA & RITARDI, LLC, Attorneys at Law, attached hereto as Exhibit "U").
- 81. As of March 14, 2024, to this very day, my office, as counsel for the Plaintiff, has not heard from the General Counsel of the College of Essex County, Ms. Christine A. Soto.

Note. As can be seen in Exhibits "S" and "T," FedEx Advanced Shipment <u>Tracking and Delivery</u>, to show how poorly the school chose to handle this matter, the documents sent on March 14, 2024, and resent on April 22, 2024, were specifically addressed to the school's general counsel, Christine A. Soto. These documents, from the Stewart Lee Karlin Law Group, were not only legal documents, but were also sent to the school's General Counsel via certified mail, therefore required a specific signature. However, the school had the document signed by an authorized person.

- 82. Due to Defendant's actions, Plaintiff's academic and professional career has been profoundly impacted, and Plaintiff was injured in an amount that exceeds the minimum jurisdiction of this Court. This has a direct financial and emotional impact on Plaintiff.
- 83. Plaintiff has exhausted all his administrative remedies and conditions precedent prior to the filing of the suit.

FIRST CLAIM FOR RELIEF-TITLE VI

- 84. Plaintiff hereby repeats and realleges each allegation in each numbered paragraph above.
- 85. Title VI prohibits discrimination on the basis of an individual's race in programs and activities receiving federal financial assistance.
- 86. The Plaintiff is a black Haitian with a discernable accent and, as such, is a member of a protected class. His dismissal was a pretext for race and national origin discrimination.
- 87. Defendant discriminated against Plaintiff in violation of Title VI because Plaintiff was dismissed on the basis of his race and national origin.
- 88. As a result of Defendant's discriminatory acts, Plaintiff has suffered and will continue to suffer substantial losses, including tuition payments and other student benefits, and has suffered other monetary and compensatory damages, for inter alia, mental anguish, emotional distress, humiliation, and loss of reputation.

SECOND CLAIM FOR RELIEF-TITLE IX

- 89. Plaintiff hereby repeats and realleges each allegation in each numbered paragraph above.
- 90. Title IX prohibits discrimination on the basis of an individual's gender in programs and activities receiving federal financial assistance.

- 91. The Plaintiff is a male black Haitian with a discernible accent and, as such, is a member of a protected class. His dismissal was a pretext for gender, race, and national origin discrimination.
- 92. Defendant discriminated against Plaintiff in violation of Title IX because Plaintiff was dismissed on the basis of his gender, race, and national origin. As a result of Defendant's discriminatory acts, Plaintiff has suffered and will continue to suffer substantial losses, including tuition payments and other student benefits, and has suffered other monetary and compensatory damages, for inter alia, mental anguish, emotional distress, humiliation, and loss of reputation.

THIRD CLAIM FOR RELIEF-SLANDER

- 93. Plaintiff hereby repeats and realleges each allegation in each numbered paragraph above.
- 94. Based on information and belief, the statements uttered by Dr. Gage, as set forth in paragraphs 18 through 22, were defamatory and false, and poisoned the entire appeal process.
- 95. Upon information and belief, the comments made by Dr. Gage were false, and malicious, made without basis, without justification, made with reckless indifference to the truth, slanderous, and calculated to produce the results mentioned immediately following.
- 96. Defendant made these statements with the intent of destroying Plaintiff's professional and academic reputation, as the nature of the allegation impugns his professional reputation.
- 97. Based on information and belief, the allegations made by Dr. Gage were so incendiary that it was natural and foreseeable that the spurious allegations would be repeated throughout the school's administration.

- 98. As a result of the publications to third parties, Plaintiff has been greatly injured in his professional and academic reputation.
- 99. Consequently, the statements are actionable slander per se.
- 100. By reasons of these publications, the Plaintiff has been greatly injured in his professional and academic reputation and character and otherwise suffered damages to his professional reputation and career.
- 101. Plaintiff has lost his income and continues to be damaged by the aforementioned conduct.

Demand for a Jury Trial

Plaintiff herein demands a trial by jury of all issues and claims in this action.

Prayer for Relief

WHEREFORE, Plaintiff prays that judgment be entered as follows:

- 1. Granting compensatory damages for injuries and accompanying pain and suffering, tuition reimbursement, career lost earnings as a registered nurse, reputational damage of \$500,000.00, and other damages sustained by Plaintiff;
- 2. Attorneys fees, costs, and disbursements;
- 3. Any other relief that is just and equitable.

Dated: New York, New York February 3, 2025

> STEWART LEE KARLIN LAW GROUP, P.C.

DANIEL EDWARD DUGAN, ESQ.

Attorney for Plaintiff 111 John Street, 22nd Floor New York, NY 10038 (212) 792-9670

Dan@stewartkarlin.com

EXHIBIT "A"

Email dated November 30, 2022



Re: Essex County College

From Jalloh, Pavi <pjalloh@essex.edu> Date Wed 2022-11-30 5:51 PM To agonel@email.essex.edu <agonel@email.essex.edu>

Good evening, Mr. Gonel.

Please note that I have shared our discussion with the President, and he has directed the Dean of Academic Affairs to reach out to you for a resolution.

Kind regards,

Pavi Jalloh 973 877-3306

EXHIBIT "B"

(August 22, 2022 Email)

8/23/22, 10:11 AM

Essex County College Students Email Mail - NRS 111 Grade Appeal Review Meeting



Alandre Gonel <agonel@email.essex.edu>

NRS 111 Grade Appeal Review Meeting

2 messages

Mon, Aug 22, 2022 at 3:59 PM Gage, Gale <gage@essex.edu> To: "Williams, Alvin" <williams@essex.edu>, Alandre Gonel <agonel@email.essex.edu> Cc: "Chapman, Jennifer" <jchapman@essex.edu>, Natalee White-Smith <nwhitesm@webmail.essex.edu>, "Graham, Robbyn" <rgraham1@essex.edu>

Dean Williams: Please note that Mr Alandre Gonel did not attend the ZOOM meeting scheduled today at 10am with both Professor Chapman & White-Smith the co Instructors for NRS 111 to begin the grade appeal process he initiated albeit late on August 15, 2022. With the student's best interest in mind, I asked the Instructors to meet with him as soon as possible to begin the process as stated by the ECC Regulation on Student Grade Appeal found at https://www.essex.edu/ecc-college-regulations/. The 2 course professors have met that standard practice and Mr Gonel did not. Therefore, his NRS 111 grade will remain a D which is a failing grade in the nursing major to proceed forward in the program at this time. However, Mr Gonel can submit a readmission form as outlined in the Nursing Student Handbook for entry into the generic program. If you have additional questions, please do not hesitate to ask. Thank you.

Gale S. Gage, PhD, RN, CNE

Chairperson & Professor

Department of Nursing

303 University Avenue

Newark, NJ 07102

Tel: 973-877-3485

gage@essex.edu



Williams, Alvin <williams@essex.edu>

Mon, Aug 22, 2022 at 4:06 PM

To: "Garcia, Maria" <mgarcia@essex.edu>, "agonel@email.essex.edu" <agonel@email.essex.edu> Cc: "Gage, Gale" <gage@essex.edu>

Maria,

Please add this forwarded correspondence to Mr. Gonel's student concern file.

 $https://mail.google.com/mail/u/0/?ik=ab133daecf\&view=pt\&search=all\&permthid=thread-f\%3A1741892748963692489\&simpl=msg-f\%3A17418927489...\quad 1/2 ab133daecf\&view=pt\&search=all\&permthid=thread-f\%3A1741892748963692489\&simpl=msg-f\%3A17418927489...$

EXHIBIT "C"

(Essex County College, College Regulation REG 6-9) Student Grade Appeal

Essex County College College Regulation

REG 6-9 STUDENT GRADE APPEAL

Purpose:

To establish an appeal procedure by which students can challenge a final grade.

Application:

- A student desiring to formally appeal a final grade will initiate the process by completing a GRADE APPEAL form and submitting it to the Division Chair. The "reason" for the appeal should be stated with sufficient detail to ensure the opportunity for a clear response.
 - a) The appeal may not be submitted until one week after the end of the semester in which the grade was awarded.
 - b) An appeal may not be submitted later than six months after the end of the semester in which the grade was awarded.
- If the student has not yet done so, the Chair will ask the student to meet with the instructor to review the criteria used in determining the final grade.
- 3) If the student and faculty member cannot resolve the matter, the Division Chair will meet with the student and the instructor within five working days. The outcome of the meeting may be:
 - a) The instructor may request a change of grade; or
 - b) The student may accept the original grade; or
 - The student may request to appear before the Divisional Grade Appeal Committee.
- 4) If the student chooses not to appear before the Divisional Grade Appeal Committee:
 - a) The Chair will convene a meeting of the Divisional Grade Appeal Committee within ten working days after the meeting with the chairperson.
 - b) The Divisional Grade Appeal Committee will be chaired by a faculty member in the division.
 - c) The student and the instructor will be asked to attend the meeting of the Divisional Grade Appeal Committee.
 - d) The committee will make a recommendation to the chairperson who will notify the student of the committee's decision within 10 days of the meeting.

- 5) If the student is still unsatisfied with the resolution suggested by the Divisional Grade Appeal Committee, the appeal will be forwarded to the appropriate academic dean.
 - a) The Dean will meet with the student in an attempt to mediate a resolution.
 - b) Failing to bring the matter to resolution, the Dean will convene a meeting of the College Wide Grade Appeal Committee.
 - c) In addition to the Dean, the Committee will have:
 - i) One faculty member from each of the academic divisions
 - ii) The Dean of Students or designee,
 - iii) The SGA president or designee
 - iv) One additional committee member may be identified by the Dean, as appropriate. In instances where the course was taught at the branch campus or another off-campus site, a representative from that site would be added to the Committee.
 - d) The student and the instructor will be asked to attend the meeting of the College Wide Grade Appeal Committee.
 - e) The College Wide Grade Appeal Committee will discuss the matter further in private and:
 - Affirm the grade as appropriate; or
 - ii) Recommend that the instructor request the grade be changed.
 - f) The decision of the College Wide Grade Appeal Committee shall be final. It will be communicated to both parties by the Dean chairing the Committee.

Responsible Official(s):	Reference: N.J.S.A. 18A:64A-12(0)
Regulation History: 2/92, Rev. 10/01; 12/10, 3/17	Attachment(s):

EXHIBIT "D"

Letter dated September 7, 2022, sent to Dr. Augustine A. Boakye, President of the Essex County College



111 John Street, 22nd Floor New York, New York 10038 (212) 792-9670/Office (844)636-1021/Fax cnk@stewartkarlin.com

Natalia Kapitonova, Esq.

Head of New Jersey Practice

MEMBER OF THE BAR NEW YORK & NEW JERSEY Concentrating in Employment, Education, Insurance & Commercial Law

September 07, 2022

Via Email to aboakye@essex.edu and Via Federal Express

Dr. Augustine A. Boakye, President Essex County College 303 University Ave. Newark, NJ 07102

Re: Mr. Alandre Gonel

Appeal Reconsideration-RNS 111

Dear Dr. Boakye:

We have been retained by Mr. Gonel, in connection with his appeal of the RNS-111 grade in the LPN program to RN bridge program. Please forward all correspondence to the undersigned.

Mr. Gonel is a Haitian student who has been a student at Essex County College for over 10 years. In May 2017, Mr. Gonel graduated as bio pre-med at Essex County College. In 2019, he enrolled in the LPN to RN bridge program at Essex County College. Since his enrollment in the LPN to RN bridge program, Mr. Gonel successfully passed all his previous nursing classes with either an A or a B+ grades. Mr. Gonel also successfully passed the LPN NCLEX exam. However, in August 2022, Mr. Gonel obtained a 72.81 for the RNS_111 class, which is a failing grade. For the following reasons, it is our position that Mr. Gonel's grade was miscalculated and that the school did not follow its own procedures in Mr. Gonel's appeal process. Thus, we respectfully ask you to reconsider Mr. Gonel's appeal and reinstate him in the LPN to RN Bridge program.

Dr. Augustine A. Boakye, President Essex County College Page -2-

During the Spring 2022 semester, Mr. Gonel took the RNS_111 (Med-Surg/Psych) course with Professor Natalee Write-Smith (Professor in Med-Surg) and Professor Jennifer Chapman (Professor in mental health) and received a "72.81" as an overall final grade (failing grade). It is our position that Mr. Gonel's grade was miscalculated.

After a careful review of the syllabus, Professor Natalee omitted 3 points Mr. Gonel earned on the ATI Proctored Exam as mentioned in the syllabus; which would have given Mr. Gonel the total of points required to pass the course, and move on into NRS 206. Specifically, this would have added 3 points to the overall score of 72.81, making the total score a 75.81, which is a passing grade. (See the syllabus, page 7, excerpt below as per your convenience)

ATI Proctored Examination (Mental Health) Individual Cut Score Required for Proficiency Points

Level 3: 85.0 % - 100.0 % 5 points

Level 2: 66.7 % - 83.3 % 3 points

Level 1: 56.7 % - 65.0 % 1 points

Below level 1: below 56.7 % 0 points

See Syllabus page 7.

In the case at hand, Mr. Gonel obtained **73.3** on the ATI proctored exam for mental health; thus reaching level 2 and thus, the additional 3 points as indicated on the syllabus should have been added to his final grade of 72.81 for a total final score of 75.81, a passing score. Thus, Mr. Gonel should be reinstated.

In addition, while reviewing the assignments grade breakdown on Moodle, there appears to be another mistake in calculating Mr. Gonel's score. Specifically, Professor Smith calculated Mr. Gonel's assignments grade point average using 85 score as Mr. Gonel's grade for the dosage calculation exam. However, Mr. Gonel actually obtained a 95 score on ATI for the dosage calculation exam, instead of 85. (please see ATI breakdown below for dosage calculation)

Dr. Augustine A. Boakye, President Essex County College

Page -3-

NRS111 Performance review meeting

Grade Overview

Exam $1 = 78 \times 0.15^{\bar{}} = 11.70$

Exam $2 = 71 \times 0.15 = 10.65$

Exam $3 = 76 \times 0.15 = 11.40$

Exam $4 = 63 \times 0.15 = 9.45$

Exam totals = 43.2%

5% Assignments = $85.87 \times 0.05 = 4.29$

Based on the performance review meeting with Professor Smith, on June 30, 2022, Mr. Gonel had 4.29 points for assignments, as shown above. Further, it is important to emphasize that the breakdown was *only* calculated based on the assignments given during Med-Surg and none for the assignments for the Mental Health class. Thus, Mr. Gonel should be allowed to go forward in the program and take NRS 206.

Furthermore, after obtaining the failing grade for RNS 111, Mr. Gonel properly followed the appeal process as stated by the ECC Regulation on Student Grade Appeal found athttps://www.essex.edu/ecc-college-regulations/. However, when he was supposed to have a meeting with faculty to discuss his appeal, he was denied the in person meeting he requested. Instead, the 2 course professors only granted him a zoom meeting as the only appeal meeting Mr. Gonel was allowed to have. This was a violation of the school's policies and procedures as there is nothing in the school handbook that states that student's appeal meetings must be held via zoom, especially if a special request is made for them to be in person.

As I am sure you are aware, there exists a contractual relationship between a private university and a student under New Jersey Law, which requires that actions taken against students meet the standard of fundamental fairness. Moe v. Seton Hall University, No. CIVA 2:09-01424, 2010 WL 1609680, at *3 (D.N.J. Apr. 20, 2010). New Jersey Courts have held that a student must be afforded reasonable notice and a fair hearing for the institution to conform with its rules and regulations. See Mittra v. Univ. of Med. & Dentistry of N.J., 316 N.J. Super. 83, 85, 91-92, 719 A.2d 693 (App. Div. 1998) see also Romeo v. Seton Hall Univ., 378 N.J. Super. 384, 393, 875 A.2d 1043 (App. Div. 2005) [*17] (noting same), certif. denied, 185 N.J. 295, 884 A.2d 1265 (2005).

Dr. Augustine A. Boakye, President Essex County College Page -3-

Here, it is a draconian penalty to deny Mr. Gonel his appeal given the miscalculation of his grade and the denial of his in person appeal meeting in violation of the school's own rules and procedures. Due to Essex County College's actions, Mr. Gonel's academic and professional career has been profoundly impacted. Mr. Gonell is currently unable to obtain his RN degree as he is unable to advance in his career and matriculate for the NRS 206 course. This has a direct financial and emotional impact. Mr. Gonel's employment prospects have had a profound impact and a substantial emotional impact on him as well.

Therefore, it is respectfully requested that for the reasons stated in this letter, the decision to deny Mr. Gonel's appeal be reversed, and that Ms. Gonel be allowed to matriculate for the NRS 206 course and to continue to pursue his RN degree. At a minimum, Essex County College should allow Mr. Gonel to continue the internal appeal process.

It is my hope that litigation would not necessary and that Essex County College reconsiders its decision to deny Mr. Gonel the opportunity to complete his RN courses.

Thank you for your consideration in this matter.

Very truly yours

S/Natalia Kapitonova

Natalia Kapitonova, Esq. Stewart Lee Karlin Law Group, P.C.

CC to : williams@email.essex.edu

Dr. Williams Alvin Executive Dean of Faculty & Academic Affairs Essex County College

EXHIBIT "E"

Syllabus Version 1

ATI Proctored Exam, Individual Cut Score Required for Proficiency Page 6, Paragraph 4, Line 3.

ESSEX COUNTY COLLEGE

DEPARTMENT OF NURSING

NURSING II MED-SURG/PSYCH

NRS 111 Spring 2022 Class Syllabus

Developed 2014

Revised Annually- 2022

ESSEX COUNTY COLLEGE

Nursing and Allied Health Division
NRS 111 Nursing II
Spring 2022 Class Syllabus

Course Faculty:

Instructor: Prof. Natalee White-Smith, MSN, RN, CEN

Office: Virtual

Office Hours: (by appointment)

Office Phone: E-mail

Email: nwhitesm@webmail.essex.edu

Instructor: Prof. Jennifer Chapman

Office: TBA

Office Hours: Tuesday: 1 pm -3 pm

Wednesday: 1pm-3pm (By appointment)

Office Phone: Email

Office E-mail: jchapman@webmail.essex.edu

Clinical Instructor: TBA

Office Hours: Faculty office hours are posted and accessible on Web services, and

Moodle room

Classroom: Lecture – 203 (Center for Health Science)

Lab - Room 206 (Center for Health Science) Computer Lab – 213 (Center for Health Science)

Department of Nursing NRS 111 - Nursing II **Course Outline**

Course Number & Name: NRS 111 Nursing II- Medical-Surgical/Mental Health Nursing

Credit Hours: 6.0 Contact Hours: 18.0 Clinical: 12.0 Lecture: 3.0 **Lab:** 3.0

Prerequisites: Grades of "C" (75) or better in NRS 104

Co-requisites: BIO 122, Pharmacology **Concurrent Courses:** None

Course Outline Revision Date: Spring, 2022

Course Description: In this course students provide safe, culturally sensitive care to adolescent, adult and older adult patients who have commonly occurring acute and chronic health alterations with predictable outcomes. Laboratory and clinical activities create an environment to assist students to apply current best evidence in a variety of health care settings including mental health and psychiatric settings. Students collaborate with the multidisciplinary health team to achieve safe quality patient outcomes in individual and group settings. The nursing process will be utilized to develop critical thinking and enhance clinical judgment when providing safe quality care to 1-2 patients.

Course Goals/Measurable Course Performance Objectives (MPOs): Upon successful completion of this course, students should specifically be able to do the following:

- 1. Provide safe culturally sensitive care to adolescent, adult and older adult patients with commonly occurring acute and chronic health alterations, mental health issues, and stressful life events with predictable outcomes.
- 2. Describe legal, ethical and professional standards when caring for adolescent, adult and older adult patients with commonly occurring acute and chronic health alterations, mental health issues and stressful life events with predictable outcomes.
- 3. Differentiate therapeutic and non-therapeutic communication techniques when caring for adolescent, adult and older adult patients with commonly occurring acute and chronic health alterations, mental health issues, and stressful life events with predictable outcomes.
 - 3a. Demonstrate in selected situations the communication skills to use with members of the healthcare team to ensure safe, quality care of adolescent, adult and older adult patients.
- 4. Discuss management and delegation of nursing care to ensure safe, quality care of adolescent, adult and older adult patients with commonly occurring acute and chronic

- health alterations, mental health issues and stressful life events with predictable outcomes.
- 5. Identify current best practices that enhance clinical judgment when caring for adolescent, adult and older adult patients with commonly occurring acute and chronic health alterations, mental health issues and stressful life events with predictable outcomes.
- Identify pertinent patient data using information technology that impacts the delivery of safe patient care for adolescent, adult and older adult patients with commonly occurring acute and chronic health alterations, mental health issues and stressful life events with predictable outcomes.
 - 6a. Use technology to communicate patient care

SLOs for NRS 111 are developed in separate lecture, laboratory, and clinical guides and are distributed to students.

Methods of Instruction: Instruction will consist of virtual lectures via Zoom, ATI instructional and skills modules, clinical assignments, discussions, audio-visual materials, discussion, case studies, group projects, computer-assisted activities, multimedia, laboratory, individual conferences, demonstration/return demonstration, writing assignments including nursing care plans, and pre and post-conference. Zoom/Moodle/ATI.

Outcomes Assessment:

- Tests and exam questions are blueprinted to coincide with the lecture, laboratory, and clinical weekly unit objectives.
- Lecture assessment correlation of course grade to standardized test score ATI.
- Laboratory assessment successful test off on skills-based upon critical elements in procedure checklist.
- Clinical evaluation is formative (weekly) and summative (mid-term and final) based upon the clinical evaluation tool, critical elements and leveled objectives.
- Program outcomes are cumulative with the correlation between course, level, and terminal program outcomes.
- Program outcomes are assessed as follows:
 - Course-specific cumulative examinations
 - Content-specific national standardized tests
 - Graduate survey/employer survey

- o Percentage of students completing the program 150%-time → goal 50%
- Percentage of students successful on the NCLEX licensure examination the first time goal 90%
- Total program evaluation tool ACEN standards assessed annually and q3 years

Course Requirements: To achieve a passing grade for this course; the student must satisfactorily complete all requirements listed below including all ATI proctored examinations.

- 1. A minimum theory grade of 75% is required to pass NRS 111.
- 2. Completion of all NRS 111 laboratory critical element/skills tests (see Lab Test-off Guide) is required to pass.
- 3. A satisfactory (passing) final clinical evaluation (see clinical evaluation tool) is required to pass.
- 4. The Nursing Student Handbook must be read, and the signature sheet submitted if not done previously. (2021-2022 RN Program Student Handbook pg. 18)
- The Nursing Student Handbook must be read, and the signature sheet submitted if not 5. done previously.
- 6. Satisfactory course attendance (see Nursing Student Handbook for attendance policies and procedures) is required to pass. (2021-2022 RN Program Student Handbook pgs. 17-18)
- 7. Successful completion of NRS 111 is required to progress to NRS 206.

Methods of Evaluation: Final course grades will be computed as follows:

Grading Components

% of final course grade

• Theory Component: 4-unit examinations Mental Health will have 2 guizzes = 1 exam Med-Surg will have 3 exams

60%

• Comprehensive Final examination

35%

A final grade of 75% must be achieved for successful course completion. A grade of "C" is required for progression to Nursing III. Grades between 74% and 70% will be recorded as a "D". Grades below 70% will be recorded as an "F".

ATI Proctored Examination (Mental Health) **Med-Surg Weekly Assignments and Quizzes**

5%

The RN Program reserves the right to use any and all standard examinations available that have documented validity and reliability.

- 1. With the exception of the Comprehensive Assessment Examination during NRS 217, the student is expected to achieve a Level 2 on all proctored examinations.
- 2. The student must complete and submit all remediation before attempting another proctored examination.
- 3. If the student is experiencing difficulty it is the student's responsibility to make an appointment to meet with the Instructor/Retention Specialist.

Individual Cut Score Required for Proficiency Points

Level 3: 85.0% – 100.0% 5 points Level 2: 66.7% – 83.3% 3 points

Level 1: 56.7% – 65.0% 1 points

Below Level 1: below 56.7% 0 points

Note: ATI Proficiency Levels pertain to individual scores only.

COURSE GRADING NOTES:

A minimum average of 75% must be attained on all unit and final examination; Grades between 74% and 70% will be recorded as a "D". Grades below 70% will be recorded as an "F".

Students are strongly encouraged to visit the Computer Lab and take ATI Practice examinations on the Website (www.ATITESTING.COM) to adequately prepare for the proctored examination.

- Satisfactory attendance
- Active participation in discussion, demonstration, and practice of skills. The student must show proof of at least 4 practice sessions before testing off of required skills.
 - 1. Complete ATI pre and post-test for assigned skills and bring to lab along with completed skills template & checklist.
 - 2. Without the completed printed forms, the student will be marked absent from the scheduled lab.

Must achieve a P (100%)

Clinical Laboratory

- An 90% on the Medication Dosage Calculations exam. SEE POLICY BELOW.
- Satisfactory attendance
- o Achieve a "Pass" on the final clinical evaluation (see clinical evaluation tool for criteria)
- Successful, on-time completion of:
 - 1. 2 nursing care plans; 1 of which can be the perioperative paper
 - 2. 2 care maps
 - 3. 2 Therapeutic Communication process recordings
 - 4. 1 Health Teaching plan
- Additional evaluative criteria: Attendance within the program policy see the student handbook.

Medication Dosage Calculation Testing Policy

The medication dosage testing policy exists to ascertain dosage calculation competency essential for safe nursing practice. It is of utmost importance that all nursing students assume personal responsibility for maintenance of math skills throughout the nursing curriculum. The dosage calculation test serves as a means for continued assessment of these important skills by clinical faculty.

The medication dosage calculation test will be given each semester making it a course requirement. The passing score will be 85% for NRS 104/106, 90% for NRS 111/114, NRS 206, and NRS 216. Students who fail to demonstrate proficiency on the first test given in each course will be permitted two (2) retake chances. However, students will be required to

Must achieve a P (100%)

remediate with the Retention Specialist or math tutors in the Learning Center and show evidence of the same before attempting another retake. (2021-2022 RN Program Student Handbook pg. 18)

Students will not be allowed to administer medications during clinical rotation until the passing score has been achieved. (2021-2022 RN Program Student Handbook pg. 18)

Therefore, students will have three (3) opportunities to achieve the minimum passing score. Failure to achieve the passing score on the medication dosage calculation test will result in an automatic clinical and course failure. (2021-2022 RN Program Student Handbook pgs. 17-18)

Approved by Nursing Faculty 12/2019

Academic Integrity: Dishonesty disrupts the search for truth that is inherent in the learning process and so devalues the purpose and the mission of the College. Academic dishonesty includes, but is not limited to, the following:

- plagiarism the failure to acknowledge another writer's words or ideas or to give proper credit to sources of information;
- cheating knowingly obtaining or giving unauthorized information on any test/exam or any other academic assignment;
- interference any interruption of the academic process that prevents others from the proper engagement in learning or teaching; and
- **Fraud** any act or instance of willful deceit or trickery.

Violations of academic integrity will be dealt with by imposing appropriate sanctions. Sanctions for acts of academic dishonesty could include the resubmission of an assignment, failure of the test/exam, failure in the course, probation, suspension from the College, and even expulsion from the College.

Student Code of Conduct: All students are expected to conduct themselves as responsible and considerate adults who respect the rights of others. Disruptive behavior will not be tolerated. All students are also expected to attend and be on time for all class meetings. No cell phones or similar electronic devices are permitted in class. Please refer to the Essex County College student handbook, Lifeline, for more specific information about the College's Code of Conduct and attendance requirements. See Nursing Handbook

NETIQUETTE GUIDE FOR ONLINE COURSES It is important to recognize that the online classroom is in fact a classroom, and certain behaviors are expected when you communicate with both your peers and your instructors. These guidelines for online behavior and interaction are known as netiquette.

SECURITY Remember that your password is the only thing protecting you from pranks or more serious harm.

- Don't share your password with anyone.
- Change your password if you think someone else might know it.
- Always log out when you are finished using the system.

GENERAL GUIDELINES When communicating online, you should always:

- Treat your instructor and classmates with respect in email or any other communication.
- Always use your professors' proper title: Dr. or Prof., or if in doubt use Mr. or
- Unless specifically invited, don't refer to your instructor by first name.
- Use clear and concise language.
- Remember that all college level communication should have correct spelling and grammar (this includes discussion boards).
- Avoid slang terms such as "wassup?" and texting abbreviations such as "u" instead of "you."
- Use standard fonts such as Ariel, Calibri or Times new Roman and use a size 10 or 12 pt. font
- Avoid using the caps lock feature AS IT CAN BE INTERPRETED AS YELLING.
- Limit and possibly avoid the use of emoticons like :)
- Be cautious when using humor or sarcasm as tone is sometimes lost in an email or discussion post and your message might be taken seriously or sound offensive.
- Be careful with personal information (both yours and others).
- Do not send confidential information via e-mail.

EMAIL NETIQUETTE When you send an email to your instructor, teaching assistant, or classmates, you should:

- Use a descriptive subject line.
- Be brief.
- Avoid attachments unless you are sure your recipients can open them.
- Avoid HTML in favor of plain text.
- Sign your message with your name and return e-mail address.
- Think before you send the e-mail to more than one person. Does everyone really need to see your message?
- Be sure you REALLY want everyone to receive your response when you click, "reply all."

 Be sure that the message author intended for the information to be passed along before you click the "forward" button.

MESSAGE BOARD NETIQUETTE AND GUIDELINES When posting on the Discussion Board in your online class, you should:

- Make posts that are on topic and within the scope of the course material Take your posts seriously and review and edit your posts before sending.
- Be as brief as possible while still making a thorough comment.
- Always give proper credit when referencing or quoting another source.
- Be sure to read all messages in a thread before replying.
- Don't repeat someone else's post without adding something of your own to it.
- Avoid short, generic replies such as, "I agree." You should include why you agree or add to the previous point.
- Always be respectful of others' opinions even when they differ from your
- When you disagree with someone, you should express your differing opinion in a respectful, non-critical way.
- Do not make personal or insulting remarks.
- Be open-minded.

APPROPRIATE APPEARANCE IN LIVE ONLINE COURSES: Remember that live online courses are to be treated like the in-person classroom.

- Your camera must be on and you must be actively engaged in the class. If not, you will be marked absent for that session.
- Please ensure that you are dressed in a manner that would be equal to your in-classroom attire.
- Please avoid confrontations with anyone in the course. If this occurs, you will be removed from the online environment.

Differently-abled Support Services

Essex County College welcomes students with disabilities into all of the college's educational programs. It is the policy and practice of Essex County College to promote inclusive learning environments. If you have a documented disability, you may be eligible for reasonable accommodations in compliance with college policy, the Americans with Disabilities Act, Section 504 of the Rehabilitation Act, and/or the New Jersey Law Against Discrimination. Please note, students are not permitted to negotiate accommodations directly with Professors, Academic Chairpersons, and Deans. To request accommodations or assistance, please self-identify with the Office of Differently abled Support Services. The office is located in the Student Development and Counseling Department at the Main Campus in Room 4122-I, and on Tuesdays at the West Essex Campus, Advisement Center. Contact us by telephone at 973-877-3071 or by email at disability@essex.edu.

Student Development and Counseling Office Room 4122 ESSEX cares about you. We want to assist you in maintaining your health and wellness as you pursue your academic goals. Asking for help is NOT a sign of weakness. It is a brave and critical step to getting the assistance that you deserve. Whenever you need someone to talk to when you feel overwhelmed, stressed out or feel like you have run out of options, reach out to a counselor:

On the Main Campus between 9:00 am and 6:00 pm, Monday -Wednesday; 9:00 am-5:00 pm on Thursday; 9:00 am-3:00 pm on Friday

Professor Kathlyn Battle 973-877-3284/Battle@essex.edu
Professor Jim Johnson 973-877-3371/Johnsonj@essex.edu
Professor Victor Stolberg 973-877-3129/Stolberg@essex.edu

At any other times, connect 24 hours a day with: Campus Security 973-877-3312 National Suicide Prevention Lifeline 1-800-273-TALK (8255) Emergency 911 Crisis Textline Text "GO" to 741741

Don't give up! It is ok not to be ok. The Counselor

Required Textbooks: All textbooks should be current /latest edition

REQUIRED TEXTBOOKS: All textbooks should be current /latest edition

Hoffman, J. & Sullivan, N. (2020). Medical-Surgical Nursing: Making connections to practice, Philadelphia: FA Davis. ISBN# 978-0-8036-7707-4

Treas, L.S., Wilkinson, J.M., Barnet, K.L., and Smith, M.H. (2018). Basic nursing: Thinking, doing, and caring, 2nd Ed. Philadelphia, FA Davis. ISBN# 978-0-8036-5942-1

Doenges, M.E., Moorhouse, M.F. & Murr, A.C. (2019). Nurse's Pocket Guide, 85th Ed., F.A. Davis ISBN# 978-0-8036-7644-2

Jarvis, Carolyn. (2019). Pocket Companion for Physical Examination and Health Assessment. 8)th Ed. Philadelphia: W. B. Saunders Co. ISBN# 9780323532020

Varcarolis, E.M. (2016) Essentials of Psychiatric Mental Health Nursing, (3rd Ed) St.

Louis: Elsevier. ISBN: 9780323389655

A drug handbook – This resource should be the **most up-to-date version** available and should have a CD for future updates!

Any Medical Dictionary

PLEASE NOTE: YOU CAN USE THE ATI RESOURCE FEATURE TO LOOK UP WORD GLOSSARY.

F.A. Davis Advantage Assignments and additional readings as provided by the instructor.

I. **Class Expectations:**

You may expect Us to:

- Arrive to class prepared.
- Provide clear instruction.
- Respect you as individuals
- Encourage you to work hard.
- Return graded tests in a timely manner.
- Encourage you to meet with your instructor early on if you have difficulty with meeting the objectives of the course not towards the end of semester.

We will expect you to:

- Concentrate only on this course during class hours.
- Complete the F.A. Davis pre and post assignments as required
- Do not receive or make phone calls or text messages. TURN OFF all cell phones before entering the classroom and especially during examinations. Placing devices on vibrate is not turned off.
- Arrive to class on time.
- Come to class prepared.
- Ask questions. Questions should be asked in class or during my office hours. Please ask for help before you fall behind.
- No private conversations while class is being conducted.
- Respect the faculty and all your classmates.
- Contact faculty if sick or unable to attend class or clinical.
- Makeup exams will be administered at the end of the semester and will be an **equivalent exam**
- All students are to bring calculators to each class. Cell phones may not be used as calculators.

ESSEX COUNTY COLLEGE DEPARTMENT OF NURSING **NRS 111- NURSING II** LABORATORY PRACTICE & TESTING POLICY

- 1. Students must enter each laboratory session having completed the required readings and study questions. At the beginning of each session, a brief question and answer period will clarify any confusing content.
- 2. Students will be responsible for viewing the ATI skills video and submitting the ATI Skills checklist template before engaging in practice. Any student without the completed template will not be allowed to practice.
- 3. Each laboratory session will begin with a demonstration of the skill or skills to be learned. A white lab coat must be worn at all times when in the skills lab.
- 4. Students are expected to practice the skill during the remainder of the class time and during additional open laboratory periods.
- 5. Students must practice the skill and show proof BEFORE performing a nursing skill test.
 - a. Students must show proof of having practiced a skill at least 3 or more times before testing off of required skill. SEE Skills Laboratory Manual for critical elements checklists.
 - b. Students are responsible for making appointments for testing well before the final deadline!
 - c. During test-offs, students will not be able to observe the testing of other students.
 - d. Students are responsible for ensuring that a record of the successful test-off is documented by the laboratory instructor.
 - e. In order to successfully complete or "pass" a lab skill, the student must successfully perform ALL critical elements for the particular lab skill being tested in the time period allotted.
 - f. If the student does not perform all critical elements for a particular skill, the student will be allowed to re-test a second time AFTER all other students have
 - g. Failure to pass a second time, will result in a written warning, counseling, and documentation of skill remediation.
- 6. If a student fails the skill on the third attempt, the student will fail the laboratory component of the course and thus fail NRS 111-Nursing II.

Laboratory test-off deadlines: Students must successfully test off on the following skills by the deadline stated. Failure to do so will result in laboratory failure and thus failure for the course unless otherwise stated. See critical elements checklist for test off

Intravenous Therapy & Calculations: WEEK 2

Tracheostomy Care: WEEK 3-4

NRS111: ATI Practice Assessments, Tutorials, & Proctored Exams

Computer programs are aimed at assisting the student to clarify, amplify or learn content relevant to Nursing II. The programs listed are offered as a means to strengthen your knowledge. The ATI programs can be accessed from any computer via the internet; open hours for computer room 213-CHS are posted.

Week 1:

Review Tutorials: ACHIEVE modules: Test taking, Study skills, Classroom skills, Preparing clinical experiences, Challenges for ESL students

Tutorials: Pharmacology Made Easy 4.0: Introduction to Pharmacology

Skills Modules 3.0: Blood Administration, 4 Medication Administration; Intravenous Infusion, IV therapy, Central Venous Access Devices, Dosage Calculations 3.0

Skills Modules 3.0: Review Physical Assessment-Adult & Child, Personal Hygiene, Vital Signs **Practice Assessment:** Targeted Medical-Surgical-Perioperative

Week 2

Review Tutorials: Nurse Logic 2.0: Knowledge and clinical judgment, Nursing concepts,

Priority-setting frameworks, Testing and remediation

Skills Modules3.0: Oxygen Therapy, Airway Management

Learning System: Medical—Surgical: Oncology

Week 3

Tutorials: Pharmacology Made Easy 4.0 Hematology **Learning System:** Medical-Surgical: Hematology

Week 4

Tutorials: Learning System RN: Respiratory

Tutorials: Pharmacology Made Easy 4.0 Respiratory System

Week 5

Tutorials: Learning System: Pharmacology, Medical-Surgical: Cardiovascular & Hematology

Tutorials: Pharmacology Made Easy 4.0 Cardiovascular System

Learning System: Medical-Surgical: Cardiovascular

Practice Assessments: Targeted Medical-Surgical: Respiratory

Week 6

Tutorials: Review Pharmacology Made Easy 4.0 Endocrine System

Skills Modules 3.0: Diabetes Mellitus Management

Week 7

Learning System: Medical-Surgical Gastrointestinal

Tutorial: Pharmacology Made Easy 4.0 Gastrointestinal System

Skills Modules: Nasogastric tube

Week 8

Tutorials: Pharmacology Made Easy 4.0 Gastrointestinal System

Skills Modules: Enteral Tube Feedings

Practice Assessments: Targeted Medical-Surgical Gastrointestinal

Week 9

Skills Modules: Ostomy Care

Week 10

Focused Review

Week 11

Mental Health

Week 12

Mental Health

Week 13

Mental Health

Week 14

Mental Health

Week 15

Mental Health

Comprehensive Final Exam date TBD

(Please note: The following calendar is a tentative schedule and is subject to change)

111 Course Calendar & Content Distribution:

	Lecture Topics	Nursing Lab-Practice is on student's own time	Clinical Lab
Week 1 3/24/2022	111 Course Orientation Lecture: The Perioperative Experience, (Preop, intraop and post-op nursing care) Treas & Wilkinson: Chapter 40 Hoffman & Sullivan: Chapters 15,16 and 17	Principles of Intravenous fluid administration and calculation for perioperative care. Blood Administration: Central venous lines, PICC Hoffman & Sullivan-Chap. 10 Treas & Wilkinson Chapter 39	On Campus Care of the perioperative patient; Principles of Intravenous Fluid administration and calculation
Assignment	ATI Assignments Davis Advantage Assignment	ATI PRACTICE ASSESSMENTS	
Week 2 3/31/2022 Assignments	Lecture: Alteration in Regulation: Cancer Hoffman & Sullivan Chap 13	Lab: Artificial airway/airway management/tracheosto my care & suctioning ATI Skills Modules: Airway Management Assessment: MDIs, peak flow, PFT, and basic Arterial Blood Gas analysis. Hoffman & Sullivan: Chap 7	On Campus Continue principles of Intravenous fluid administration and calculation ATI Skills Module: IV Therapy Review Complete Agency Orientation Forms/Competencies Clinical Agency, Clinical
Week 3	ATI Assignments Davis Advantage Assignment Lecture:	DOSAGE CALCULATION EXAM	Expectations: Clinical Evaluation Tool, Nursing Care Plan/Map, Perioperative Paper, Health Teachings (See Clinical Guide) Clinical Agency

	T		<u> </u>	
4/7/2022	Coordinating Care for Patients with Hematological Disorders	Blood Administration: Central venous lines, PICC	Report to Assigned Agency: Orientation to Clinical Agencies	
	Hoffman & Sullivan Chaps 33 & 34		Assess needs, plan, and implement care for clients with alterations in regulation: Care of the Patient with Cancer and who require IVs	
Assignment	ATI Assignments Davis Advantage Assignment		(See Clinical Guide)	
Week 4 4/14/2022	EXAM 1 Lecture: Promoting Health in Patients with Oxygenation Disorders:	Artificial airway/airway management/tracheosto my care & suctioning	Clinical Agency Assess needs, plan, and implement care for clients with alterations in regulation:	
	Hoffman & Sullivan: Chapters 23, 24, 25, 26, 27 Treas & Wilkinson: Chapter 37	Treas & Wilkinson; pages 1408-1419 Tracheostomy care & suctioning Test Off	Respiratory disorders (See Clinical Guide)	
Assignment	ATI Assignments Davis Advantage Assignment	ASTHMA SIMULATION		
Week 5 4/21/2022	Lecture: Promoting Health in Patient with Circulatory Perfusion Disorders Hoffman & Sullivan Chapters: 28, 29, 30, 31, 32	Basic ECG interpretation, basic dysrhythmia interpretation Treas & Wilkinson Chapter 37; pages 1363- 1367 Hoffman & Sullivan Chap: 29 ATI PRACTICE	Care of the cardiovascular patient Clinical Agency Assess needs, plan, and implement care for clients with alterations in regulation: Cardiovascular disorders (See Clinical Guide)	
Assignment	ATI Assignments Davis Advantage Assignment	ASSESSMENT	(1.00 2	

	T		T
Week 6 4/28/2022	Lecture: Promoting Health in Patients with Endocrine Disorders: Diabetes Mellitus Hoffman & Sullivan Chap: 44	Skills related to Diabetes Mellitus: Blood Glucose Monitoring & Insulin Administration Hoffman & Sullivan	Clinical Agency Assess needs, plan, and implement care for clients with alterations in regulation: Diabetes
Assignment	ATI Assignments Davis Advantage Assignment	SIMULATION: DIABETIC HYPOGLYCEMIA DOSAGE CALCULATION EXAM	
Week 7 5/5/2022 Assignment	EXAM 2 Lecture: Promoting Health in Patients with Endocrine Disorders: Thyroid and Parathyroid Hoffman & Sullivan Chap: 43 ATI Assignment Davis Advantage Assignment	Tube feedings, Hyperalimentation Gastrostomy tubes, feeding pumps Treas & Wilkinson pages 987-1005	Clinical Agency Assess needs, plan, and implement care for clients with alterations in regulation: Endocrine Problems (See Clinical Guide)
Week 8 5/12/2022 Assignment	Lecture: Promoting Health in Patients with Gastrointestinal Disorders: Upper Gastrointestinal Disorders Hoffman & Sullivan Chapters: 56, 57	Tube feedings, Hyperalimentation Gastrostomy tubes, feeding pumps and Medication Administration Treas & Wilkinson pages 987-1005	Clinical Agency Assess needs, plan, and implement care for clients with alterations in regulation: Gastrointestinal Disorders (See Clinical Guide) *MID-TERM EVALUATIONS DUE*
Assignment	ATTASSIGNMENTS	ATI PRACTICE ASSESSMENT	LVALOATIONS DUE

NRS 111 CLINICAL GUIDE SPRING 2022S

NRS 111 CLINICAL REQUIREMENTS

Written Requirements:

- 1. All written work is to be submitted on the day designated by the clinical instructor.
- 2. A care plan or Perioperative paper is due for the clients cared for during the weeks of your medical-surgical rotation as assigned by the clinical instructor. After assessing the client, the student should identify all relevant Nursing Diagnoses and list them on the Assessment form. A care plan or care map should be developed for three priority Nursing Diagnoses/Problems. The Perioperative paper will take the place of one (1) care plan.
- 3. The student is responsible for explaining all medication information related to one's client. Written medication information is expected with each care plan. A maximum of eight medications will be required.
- 4. Two process recordings are **due** for your assigned patient during the weeks of Psych/mental Health rotation. See the Clinical Guide: Therapeutic Communication.
- 5. Health Teaching Assignment is due for the clients cared for during the weeks of medicalsurgical rotation as assigned by your clinical instructor.

Behavioral Requirements: (See Nursing Student Handbook)

1. Absence

If the student must be absent from clinical, it is the student's responsibility to call the clinical unit and the college to report the absence for that day. The student must meet with the clinical instructor upon return to class to determine how to meet the clinical objectives for the day(s).

2. Lateness

Arriving late in the clinical area and submitting late written work is not tolerated without justifiable reason. If the student cannot arrive to the clinical area on time, or cannot submit written work on schedule, the student should notify the clinical instructor. Persistent lateness, for whatever reason will result in clinical failure. See Nursing Student Handbook

3. Appearance and Equipment

See Nursing Student Handbook

4. Performance

The student is responsible for the application of all previously learned skills and theory. One must be prepared to discuss the client's medical and nursing diagnoses and plan of care, including medications. If not prepared, the student will be counseled verbally and in writing. Persistent lack of preparation will result in clinical failure. The student must obtain an 80% on the ATI Dosage Calculations proctored exam. If unsuccessful after 1st attempt, students must attend mandatory remediation. If after two attempts the student does not achieve an 80%, the student will not be able to administer medications in the clinical area and will therefore Not achieve the course objective. NOT achieving the medication course objective will constitute a clinical failure.

NRS 111 Clinical Guide Therapeutic Communication

This assignment is to be submitted during the weeks of Psych/Mental Health rotation:

- 1. Assess, plan and implement care for the client to which you have been assigned.
- 2. Write a process recording based on a 5-minute segment of a therapeutic conversation that you have had with your client.

Guidelines:

- Introduce myself to clients. a.
- b. Determine appropriate time and place to talk with your client.
- c. Initiate a simple conversation as you interact with your patient. E.g., the weather, in the news, Current events, a special Holiday (past, present or future), a book read, special foods etc. (Stay away from religion or politics).
- d. Note your body language and that of your client.
- e. Following the interaction, leave the room and record what was said by you and the assigned client, (Verbatim).

Analyze your response by determining if the conversation was indeed therapeutic. If it wasn't stated what you could have said to encourage the expression of your client's feelings about him or herself in the analysis section. Use your textbook and the NRS 107 handout on Therapeutic Communication to help you to analyze your responses.

Verbatim Student	Verbatim Client	Therapeutic	Non Therapeutic	Student's Analysis/ Why

ESSEX COUNTY COLLEGE NURSING DEPARTMENT **NRS 111**

Guidelines for giving oral clinical report

Client Report							
Client's name	·		Room #_	Se	2X	Date	
DNR Yes	No	_Date					
Primary Diag	nosis (s)						
D							
Reason for a	imission						
Surgery (This	admissio	on) Date		Туре		# days post op	_
Current medi	cal probl	ama hair	aa traatad				
Current medi	=		_				
2)							
3)							
4)							
Scheduled for	r any dia	anostic t	ests (When	reason for)			
	any ara	griostic t	ests (winch,	reason jory			
Nursing object	ctives for	today					
First Priority 1							
Second Priori							
2)							
Third Priority							
3)							
Reaso	n						
Identify if you	ı client h	as nain i	medication o	rdered?			
	, chemen	us puiii i	neareation o	racrea.			
							
Identify if you		•	•	•	-	_	
Identify if you	ır client ı	requires	any medicat	ions for slee	p?		
Baseline Date	a Vital	Sians					
		_	Radial Re	spiration	B/P	Pain	
		-					

	2)
	3)
	4)
NICHDO ACCCCCATAIT	
NEURO ASSESSMENT:	Times
Level of Consciousness:	
Alert	
Confused	
	
Other	
Level of Activity BR	BRPOOB
	 Semi-Fowler'sFlat
Side rails 42	
	No if yes, know fall precaution policy
Restraints Yes No	Renewal date
RESPIRATORY ASSESSMEN	
	Work of Breathing
Lung Sounds	
Oxygen Therapy	
Nasal Cannula:LPM	Pulse Ox%
	-RB Liter Flow %delivered
Ventilator Mode CMV	
	_% Tidal Volumecc
	Ventilator Client's rate
	cm's Pressure
Suctioning ColorCon	nsistencyAmt
CARDIAC ASSESSMENT	
Pulse Rate & Rhythm_	Heart sounds
Pulses <u>Strong</u> <u>Weak</u>	Bounding Absent
Pedal	
Chest pain: Yes No_	Level #Site (if yes) Character
Radiating to	
	Time administered
	Date last taken/ result
INTRAVENOUS THERAPY	
Solution # 1	Solution #2

Infusion Rate	Infusion Rate				
Site of Infusion	Site of Infusion				
Amount in Bag					
Peripheral Infusion site					
Central:	 Central:				
Subclavian	<u>_</u>				
Jugular	_ Jugular				
Other	Other				
Piggybacks	Time due				
					
GASTROINTESTINAL ASSESSI	<u>MENT</u>				
<u>Abdomen</u>					
	oactiveNormalHyperactive				
	BM Color ConsistencyAmt				
	ninage ColorConsistency				
Amount					
NGT/ PEG Tube Feeding Type					
Infusion Rate Resid	lual Bolus Amt Free H2O				
URINARY ASSESSMENT					
Voiding: Yes_ No	Color Amount				
Catheter: FoleyTexas	SuprapubicNephrostomy tube				
Date inserted Cathet	ter size				
<i>Color</i>	Amount				
SKIN ASSESSMENT					
Skin intact					
	StageSize				
Treatment					

*In the clinical sites use the SBAR format for hands off communication according to agency policy.

ESSEX COUNTY COLLEGE RN NURSING DEPARTMENT

NRS 111 PERIOPERATIVE EXPERIENCE **Observational Experience Objectives and Written Assignment**

This assignment is to be completed 2 weeks after your observational experience in the operating room and post-anesthesia unit

Main Objectives:

- Explain the nursing responsibilities related to teaching a client during pre and post-1. operative period.
- 2. Explain how the basic physiological and psychosocial needs of a client are met
 - a. in the operating room and
 - b. in the recovery room.
- 3. Describe the role of the nurse during the immediate and longer term post-operative
- 4. Describe the discharge planning and teaching of a client who undergoes surgery.

CRITERIA: **POINTS**

- If possible, observe a major surgical procedure. 1.
- 5 2. Obtain the following data related to the client that you have observed:
 - Patient initials
 - Age, gender, marital status
 - Medical diagnoses or past medical history
 - Name of the surgical procedure
- 15 3. Research the surgical procedure in a textbook or over the internet and give a brief account of how the anatomy and physiology are altered either positively or negatively as a result of this surgery. (This should be approximately one typewritten page.)
- 20 4. Write a preoperative teaching plan that relates to and is specific for the surgery observed. The plan must be specific to the actual surgical observed. You can use the column format example as shown below but is not mandatory.

Goals Interventions Expected outcome

Client will participate in Preop activities to minimize Post -op complications by (Date TBD).

5

- 10 5. Throughout your observation of the client undergoing surgery, take notes or remember how the client's needs for the following were met.
 - Bacteriological safety
 - Medical/thermal safety
 - Oxygen
 - Fluid needs (identify all solutions used)
 - Elimination
 - Pain and comfort needs (name the drugs used pre-and Intraoperatively
 - 6. List the members of the surgical team and describe their responsibilities.
- 15 7. List the nursing actions of the post anesthesia unit nurse and state the rational for each intervention. Must be specific to the PACU and surgery performed.
- 15 8. List the postoperative nursing interventions that would be appropriate if you were caring for this client on a post-op nursing unit. List the rationale for each nursing intervention.
 - 9. List 2 potential postoperative complication directly related to the surgical procedure performed.
- 15 10. Research from the literature, the discharge and home care planning, and discharge teaching necessary for this client in relation to this type of surgery.

Directions for writing the paper-APA Format required

- 1. Type the information obtained in items 2-10 in the form of a research paper.
- 2. Information obtained for textbooks, journals or the internet MUST include references if you paraphrase or take a direct quote from a source other than yourself, you must cite the source in APA style. If material is not referenced, it will be returned for correction.
- 3. 5 other references are required in addition to the textbook.
- 4. 5 or more grammatical and or spelling errors will be returned for correction.
- 5. The paper is due 14 days after the observational experience. An extension may be granted per permission of the clinical instructor.

Grading:

- 1. The paper will be graded Satisfactory or Unsatisfactory.
- 2. A grade of Satisfactory can be obtained by the following in a complete manner: the directions for writing the paper, which are listed above and by obtaining a total of 75 points.
- 3. If a paper is graded Unsatisfactory, the student will have one (1) week to correct the deficiency for regarding. If the paper is unsatisfactory after regarding, a grade of F will be assigned. This will result in a clinical failure of the course.

http://www.apastyle.org/learn/tutorials/basics-tutorial.aspx View tutorial for cover page, abstract, text and references

Essex County College Department of Nursing HEALTH TEACHING PLAN GUIDELINES

PURPOSE:

To provide the student with the opportunity to plan and implement an educative/supportive method of nursing care for an individual/family/group.

GUIDELINES:

- Select an individual/family/group who demonstrates a knowledge deficit (example: 1. one which threatens their achievement of a maturational or situational task. (10pts)
- Complete a brief nursing history to substantiate the client's need for educative/ 2. supportive intervention. Identify the client's strengths and limitations in meeting the therapeutic self-care demand and documenting the nursing diagnosis. (20pts)
- 3. Develop a teaching plan which includes: (40pts)
 - a. Specific client/focused learning objectives; at least 2.
 - b. Topical outline of content material;
 - c. Planned teaching strategies and learning activities
 - d. Time frame for planned activities; and
 - e. Evaluation criteria.
- Implement the teaching plan. (10pts) 4.
- 5. Evaluate the effectiveness of the teaching plan in achieving learning objectives using established evaluation criteria, including actual or suggested adaptations (if appropriate) to original plan. Include rationale of positive or negative responses to your plan. Any reinforcement or new approaches needed. (20pts)

Students must achieve a 75 and above in order to receive a satisfactory/ passing grade.

HEALTH TEACHING PLAN FORM (EXAMPLE)

Student			Date
Clients initials	Age	Instructor	

GOAL:	T		ı	
OBJECTIVE	Content	Teaching Learning Activities	Time Allotment	Evaluation Method
By the end of this lesson,	Introductions Relaxation	Discussion question "What does	20 min. session	
client will be able to:	Definitions	relaxation means to you?" Discuss the		
	Balance with exercise	relationship between stress and blood		
Select from a list three	Benefits	pressure. Give the patient the pamphlet:		
Benefits of relaxation	Reduce blood pressure	Balancing Relaxation and Exercise.		
(Cognitive).	Reduce tension			
	Increase efficiency	Discuss fears and mixed feelings.	10 min. session	
Agree to experiment with		Question: "Who else in you family has		
Walking and various	<u>Medication</u>	been diagnosed with hypertension?		
relaxation techniques	Fears	What did it do to them? What		
(Affective).	Side effects	have they done to control it, and what		
		were the results?"		
Count his pulse within three	<u>Life-style Change</u>			
beats of what the nurse	Costs	Demonstrate pulse taking. Have the		
counts (Psychomotor.)	Benefits	client return demonstration of pulse		
, ,		taking.	30 min. session	
	Techniques for pulse taking	Develop a record keeping system for		
	Location of artery	monitoring pulse rate.		
	Finger placement			
	Counting	Read directions for deep breathing, yoga,		
	Multiplying	meditation, and imagery.		
	Recording method	Obtain a clock		
		with a second hand.		
	Technique for relaxation	Develop a chart for		
	Deep breathing	record-keeping at home.		
	Yoga	Obtain an audio cassette for recording		
	Medication	directions for deep breathing	20 min. session	
	Imagery	yoga, meditation, and imagery.	20 111111 30331011	
	Prayer	Have the client select soothing prayers.		
	Wrap up			

CLIENT ASSESSMENT (To accompany teaching plan)

Students' Name		Date	
Agency			
Client's Initials Age	Sex	Department	
Assessment/Data Collection			
Pertinent Client Data			
Subjective:			
Objective:			
			
Assessment/Analysis			
Nursing Diagnosis (Knowledge defici	it related to)		
Clients Assets and Limitations (relat	ive to knowledge	e deficit)	
<u>ASSETS</u>		<u> </u>	LIMITATIONS
		l	
		l	
		l	
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HEALTH TEACHING PLAN FORM

Student	Date	Clients initials
Nursing Course	Instructor	
Facility	Age	
	_ ''0'	

GOAL:				
OBJECTIVE (Cognitive) (C) (Psychomotor) (P) (Affective) (A)	Content	Teaching Learning Activities	Time Allotment	Evaluation Method

ESSEX COUNTY COLLEGE

DEPARTMENT OF NURSING

NURSING II Laboratory Syllabus NRS 111

2021-2022 Dev 2015; Rev 2022

Week 1 and 2: Meeting the Need for Safety: I.V. Medication Administration

Unit Objective:

The student will utilize safe and appropriate nursing skills when caring for clients who are receiving intravenous medications.

Learning Outcomes:

Upon completion of this lab, computer-assisted instruction and the assigned reading, the student will:

1. Define the following terms:

Heparin Lock Drug incompatibility Piggy-back Heparin flush Allergic reaction Diluent

Primary I.V. Volume control device

- 2. Demonstrate appropriate nursing actions when initiating administration of I.V. medications.
- 1. Identify nursing responsibilities during administration of I.V. medications.
- 2. Calculate and regulate I.V. flow in accordance with Physician's order in drops/minute.
- 3. Record I.V. medication administration on medication record and I&O sheet.
- 4. Demonstrate nursing actions required after I.V. Medication has been infused.
- 5. Explain complications of I.V. medication administration.
- 6. Demonstrate nursing skill of changing I.V. solution, I.V. tubing, and dressing of primary I.V. tubing, and dressing of primary I.V. site.
- 7. Explain signs and symptoms of an allergic reaction.

Skills:

- 1. Identify equipment.
- 2. Read Physician's order.
- 3. Dilute powder medication with diluent.
- 4. Prepare appropriate I.V. medication and prime tubing.
- 5. Initiate administration of I.V. medication to I.V. tubing and heparin lock.
- 6. Calculate and regulate drop flow rate.
- 7. Record infusion on nurse's note, and medication record.
- 8. Terminate I.V. medication from I.V. tubing and heparin lock.
- 9. Change I.V. solution, tubing and site dressing.

Required Reading:

Hoffman & Sullivan Chapter 10 Treas & Wilkinson: Chapter 39

Audio-Visuals:

ATI Skills Modules 3.0: Administration of I.V. Medications; IV Therapies and Peripheral Access".

Simulation Lab- General Assessment, Vital signs, Lung Sounds, Bowel sounds

<u>Evaluation:</u> Return Demonstration and completion of IV test off

WEEK 3 Coordinating Care for Patients with Hematological Disorders: Blood Administration & Central Venous Catheters

Learning Outcomes:

Following the completion of this lab and the assigned readings, the student will:

1. Define the following terms:

> Blood transfusion hemolytic reaction agglutination Blood group Autotransfusion hemolysis Hemorrhage universal donor Plasma universal recipient

Antibody antigen Rh factor **HLA** system

Triple lumen catheter

- 2. Explain the indications for a blood transfusion.
- 3. List the four main groups and two RH groups of human blood.
- 4. Describe the blood products and indications for their use.
- 5. Demonstrate the nursing procedure of initiating, maintaining and terminating a blood transfusion.
- 6. Differentiate the various types of transfusion reaction according to clinical signs and symptoms, nursing and medical interventions and expected outcomes
- 7. Summarize the nursing responsibilities of caring for a client who is receiving a blood transfusion.
- 8. Identify different types of CVC catheters
- 9. Apply Sterile Dressing technique of vascular access devices

Skill: Blood Administration

Required Reading

Hoffman & Sullivan: Pages 161-172

Treas & Wilkinson: Pages 1482-1493, 1515-1526

ATI Skills Module 3.0: Blood Administration; Central Venous Access Device

ATI Skills Module 3.0 Virtual Scenario: Blood Transfusion

Practice previously learned skills:

I.V. Therapy

WEEK 4 Promoting Health in Patients with Oxygenation Disorders: Care of the Client with an Artificial Airway, Interpretation of Basic Arterial Blood Gases (ABG)

Learning Outcomes:

Following the completion of this lab and the assigned readings, the student will:

- 1. Define the following terms:
 - Artificial airway Tracheostomy Intubation Hyperoxygenation Suctioning Hyperventilation
- 2. Explain the indications for artificial airways
- 3. Identify proper placement of artificial airway:
 - a. Oropharyngeal
 - b. Nasopharyngeal
 - c. Endotracheal
 - d. Tracheostomy
- 4. Demonstrate nursing care related to clients with artificial airways:
 - a. assessment of client
 - b. position of client
 - c. oral and nasal hygiene
 - d. tube maintenance and anchoring
 - e. monitoring cuff pressure
 - f. oxygen therapy
 - suctioning of secretions
 - h. Tracheostomy hygiene
 - complications of artificial airways
- 5. Compare and contrast nursing care for clients with endotracheal tubes and tracheostomy tubes.
- 6. Explain nursing responsibilities for discharge and community care for clients with tracheostomy.
- 7. Interpret basic arterial blood values
 - a. Respiratory Acidosis
 - b. Metabolic Acidosis
 - c. Respiratory Alkalosis
 - d. Metabolic Alkalosis

Skills

- 1. Suctioning Technique-Open & Closed Suctioning
- 2. Tracheostomy Care

Required Readings: Hoffman & Sullivan Chapter 7 pp 80-99

Treas & Wilkinson Chapter 37 pg 1378-1380; 1385-1390; 1416-1408-1429

Hoffman & Sullivan Chapter 9

Treas & Wilkinson: Chapter 39 pg. 1472-1475-

Audio Visuals: ATI Skills Module: Airway Management

Evaluation: Return demonstration and test –off

WEEK 4 – ASTHMA SIMULATION

Learning Outcomes:

Upon completion of this lab, video viewing and assigned reading, the student will:

Demonstrate competencies outlined by the NCSBN clinical judgment model by applying learned knowledge and principles of airway management to care for the simulation client experiencing acute asthma exacerbation.

Skills:

SIMMAN SIMULATION:

Required Reading

Evaluation:

- 1. Student & Faculty Simulation Evaluation Survey
- 2. Continue practice on identification and interpretation of situations involving patients having an asthma attack.

WEEK 5- Coordinating Care for Patients with Cardiac Dysrhythmias

Learning Outcomes:

Upon completion of this lab, CAI and assigned reading, the student will:

- 1. Discuss the unique properties of cardiac cells
- 2. State the components of a normal ECG complex.

PR interval, QRS, ST, QT

3. Identify the following basic dysrhythmias on an ECG tracing:

Sinus Tachycardia **Atrial Fibrillation**

Sinus Bradycardia **Premature Ventricular Complex**

Sinus Arrhythmia Ventricular Tachycardia **Premature Atrial Complex** Ventricular Fibrillation

Atrial Flutter **Heart Blocks**

- 4. Calculate heart rate and rhythm from an ECG tracing.
- 5. Identify appropriate nursing interventions for each of the basic dysrhythmias.
- 6. Differentiate cardioversion from defibrillation.

Skills:

- 1. To measure correctly each time interval of an ECG complex.
- 2. To compute the cardiac rate on an ECG tracing.
- 3. Interpret basic dysrhythmias and plan appropriate interventions

Required Readings:

Hoffman & Sullivan: Chapter 29

Audio-Visual: TBA

WEEK 6 - Promoting health in Patient with Endocrine Disorders: Diabetes Mellitus Skills related to Diabetes Mellitus: Blood Glucose Monitoring & Insulin Administration.

Learning Outcomes:

Upon completion of this lab, the film viewing and the assigned readings: the student will:

- 1. Set up calibration of the glucose monitor device.
- 2. Apply proper procedure of obtaining capillary blood glucose

Test with a glucose monitoring device.

- 3. Demonstrate accuracy when reading U-100 insulin syringe and correct administration of insulin according to prescribed dosage.
- 4. Apply correct procedure for mixing two different insulin preparations into one syringe.

Skill:

- 1. Perform capillary blood glucose monitor check on human volunteers.
- 2. Prepare the correct dose of insulin and administer it into the mannequin.
- 3. Mix two different types of insulin in one syringe.
- 4. SIMMAN Simulation: The Client with Insulin Injection

Required Reading:

Treas & Wilkinson: Pages 984-987

Audio-visuals

http://www.bd.com/us/diabetes/page.aspx?cat=7001&id=7258

Go to the Diabetes Learning Center-Syringes, methods of administration, mixed insulin, insulin pharmacology

ATI Skills Modules: Diabetes Management

Week 6- SIMULATIONS: DIABETIC HYPOGLYCEMIA

Learning Outcomes:

Upon completion of this lab, video viewing and assigned reading, the student will:

- Demonstrate competencies outlined by the NCSBN clinical judgment model by applying learned knowledge and principles of airway management to care for the simulation client experiencing diabetic hypoglycemia.
- Identify the appropriate assessment parameters.

•

 Select the appropriate medical and nursing assessment and intervention to prevent poor client outcomes.

Skills:

SIMMAN SIMULATION:

Required Reading:

Evaluation:

- 1. Student & Faculty Simulation Evaluation Survey
- 2. Continue practice on identification and interpretation of situations involving patients experiencing a hypoglycemic event.

Week 8 Alteration in the Need for Fluid: Tube Feedings, Hyperalimentation

Learning Outcomes:

Following the completion of this lab and the assigned readings, the student will:

1. Define the following terms: Hyperalimentation

Total parenteral nutrition (TPN)

Catabolic Subcutaneous emphysema

Negative nitrogen balance

Anabolic

Hyperglycemia

- 2. Identify the ingredients of total parenteral nutrition.
- 3. Recognize different sites for administration of TPN
- 4. Explain the indications for use of TPN solutions and its complications
- Relate the nursing process to the care of the client receiving TPN. 5.
- 6. Formulate a nursing process on the care of clients with central venous catheters (CVC) and PICC lines.

Skills

Required Reading:

Hoffman & Sullivan: Chapter 10 pages 171-172

Treas & Wilkinson: Chapter 28 pg 975-976; 998-1004; Chapter 29

WEEK 8 - Meeting the Need for Nutrition: Tube feeding, Gastrostomy tubes

Learning Outcomes:

Upon completion of this lab, film viewing, CAI and the assigned readings, the student will:

1. Define the following terms:

Malnutrition Gavage vs. Lavage Calorie Gastrostomy tube **Emesis** Kangaroo pump Jejunostomy tube Projectile vomiting

Regurgitation Percutaneous Endoscopic Gastrostomy (PEG)

Nasogastric intubation

- 2. Describe the types, etiology, pathophysiology, clinical manifestations, diagnostic studies, and therapeutic and nursing management of malnutrition.
- 3. Explain indications for gastric gavage.
- 4. Demonstrate the nursing measures to check for the correct position of the nasogastric tube.
- 5. Apply the nursing process to clients who receive continuous nasogastric and gastrostomy tubes.
- 6. Illustrate the nursing implications for administering medications through a nasogastric and gastrostomy tube.
- 7. Explain the complications of nasogastric and gastrostomy feedings and the appropriate nursing interventions to prevent complications.
- 8. Demonstrate the use of a feeding pump.

Skills:

Check or placement of the NG tube Set up and initiate single tube feeding Prime kangaroo pump Record I & O

Required Reading:

Treas & Wilkinson: Chapter 28 pg. 969 – 977; 992-996; Chapter 25, 830-832

Audio-Visual:

ATI Skills Modules: Nasogastric Intubation & Enteral Tube Feeding

Week 9 - Alteration in the Need for Fecal Elimination: Bowel Diversion/Ostomies

Learning Outcomes:

Following the completion of this lab and the assigned readings, the student will:

1. Define the following terms:

Ostomy effluent Kock pouch Stoma Sigmoid Ileostomy Ureterostomy Colostomy Peristomal

- 2. Identify the different anatomic location of all intestinal ostomies & relate the location to the character and management of fecal drainage.
- 3. Describe three types of stoma constructions.
- 4. Discuss assessment parameters of the bowel diversion ostomy.
- 5. Relate nursing diagnoses, goals, interventions and outcome criteria to the client who has a bowel diversion ostomy.
- 6. Apply the skill of changing a bowel diversion ostomy appliance.
- 7. Demonstrate skin care of the peristomal area.
- 8. Identify the purpose of the colostomy irrigation.

Skills:

1. Changing a bowel diversion ostomy appliance.

Required Reading:

Treas & Wilkinson: Chapter 29 pages 1012-1014; 1047-1053;

Audio-Visuals:

ATI Skills Modules: Ostomy Care

WEEK 1: Mental Health Lab/ IV Lab; Clinical on Campus

WEEK 2: Mental Health Lab/ IV Lab; Clinical on Campus

WEEK 3: Mental Health Lab

WEEK 4: Mental Health Lab

WEEK 5: Mental Health Lab/ ATI Proctored Exam Retake

EXHIBIT "F"

Syllabus Version 2

ESSEX COUNTY COLLEGE

DEPARTMENT OF NURSING

NURSING II MED-SURG/PSYCH

NRS 111 Spring 2022 Class Syllabus

Developed 2014

Revised Annually- 2022

ESSEX COUNTY COLLEGE

Nursing and Allied Health Division NRS 111 Nursing II Spring 2022 Class Syllabus

Course Faculty:

Instructor: Prof. Natalee White-Smith, MSN, RN, CEN

Office: Virtual

Office Hours: (by appointment)

Office Phone: E-mail

Email: nwhitesm@webmail.essex.edu

Instructor: Prof. Jennifer Chapman

Office: TBA

Office Hours: Tuesday: 1 pm -3 pm

Wednesday: 1pm-3pm (By appointment)

Office Phone: Email

Office E-mail: jchapman@webmail.essex.edu

Clinical Instructor: TBA

Office Hours: Faculty office hours are posted and accessible on Web services, and

Moodle room

Classroom: Lecture – 203 (Center for Health Science)

Lab - Room 206 (Center for Health Science) Computer Lab – 213 (Center for Health Science)

Department of Nursing NRS 111 - Nursing II **Course Outline**

Course Number & Name: NRS 111 Nursing II- Medical-Surgical/Mental Health Nursing

Credit Hours: 6.0 Contact Hours: 18.0 Clinical: 12.0 Lecture: 3.0 **Lab:** 3.0

Prerequisites: Grades of "C" (75) or better in NRS 104

Co-requisites: BIO 122, Pharmacology **Concurrent Courses:** None

Course Outline Revision Date: Spring, 2022

Course Description: In this course students provide safe, culturally sensitive care to adolescent, adult and older adult patients who have commonly occurring acute and chronic health alterations with predictable outcomes. Laboratory and clinical activities create an environment to assist students to apply current best evidence in a variety of health care settings including mental health and psychiatric settings. Students collaborate with the multidisciplinary health team to achieve safe quality patient outcomes in individual and group settings. The nursing process will be utilized to develop critical thinking and enhance clinical judgment when providing safe quality care to 1-2 patients.

Course Goals/Measurable Course Performance Objectives (MPOs): Upon successful completion of this course, students should specifically be able to do the following:

- 1. Provide safe culturally sensitive care to adolescent, adult and older adult patients with commonly occurring acute and chronic health alterations, mental health issues, and stressful life events with predictable outcomes.
- 2. Describe legal, ethical and professional standards when caring for adolescent, adult and older adult patients with commonly occurring acute and chronic health alterations, mental health issues and stressful life events with predictable outcomes.
- 3. Differentiate therapeutic and non-therapeutic communication techniques when caring for adolescent, adult and older adult patients with commonly occurring acute and chronic health alterations, mental health issues, and stressful life events with predictable outcomes.
 - 3a. Demonstrate in selected situations the communication skills to use with members of the healthcare team to ensure safe, quality care of adolescent, adult and older adult patients.
- 4. Discuss management and delegation of nursing care to ensure safe, quality care of adolescent, adult and older adult patients with commonly occurring acute and chronic

- health alterations, mental health issues and stressful life events with predictable outcomes.
- 5. Identify current best practices that enhance clinical judgment when caring for adolescent, adult and older adult patients with commonly occurring acute and chronic health alterations, mental health issues and stressful life events with predictable outcomes.
- Identify pertinent patient data using information technology that impacts the delivery of safe patient care for adolescent, adult and older adult patients with commonly occurring acute and chronic health alterations, mental health issues and stressful life events with predictable outcomes.
 - 6a. Use technology to communicate patient care

SLOs for NRS 111 are developed in separate lecture, laboratory, and clinical guides and are distributed to students.

Methods of Instruction: Instruction will consist of virtual lectures via Zoom, ATI instructional and skills modules, clinical assignments, discussions, audio-visual materials, discussion, case studies, group projects, computer-assisted activities, multimedia, laboratory, individual conferences, demonstration/return demonstration, writing assignments including nursing care plans, and pre and post-conference. Zoom/Moodle/ATI.

Outcomes Assessment:

- Tests and exam questions are blueprinted to coincide with the lecture, laboratory, and clinical weekly unit objectives.
- Lecture assessment correlation of course grade to standardized test score ATI.
- Laboratory assessment successful test off on skills-based upon critical elements in procedure checklist.
- Clinical evaluation is formative (weekly) and summative (mid-term and final) based upon the clinical evaluation tool, critical elements and leveled objectives.
- Program outcomes are cumulative with the correlation between course, level, and terminal program outcomes.
- Program outcomes are assessed as follows:
 - Course-specific cumulative examinations
 - Content-specific national standardized tests
 - Graduate survey/employer survey

- o Percentage of students completing the program 150%-time → goal 50%
- Percentage of students successful on the NCLEX licensure examination the first time goal 90%
- Total program evaluation tool ACEN standards assessed annually and q3 years

Course Requirements: To achieve a passing grade for this course; the student must satisfactorily complete all requirements listed below including all ATI proctored examinations.

- 1. A minimum theory grade of 75% is required to pass NRS 111.
- 2. Completion of all NRS 111 laboratory critical element/skills tests (see Lab Test-off Guide) is required to pass.
- 3. A satisfactory (passing) final clinical evaluation (see clinical evaluation tool) is required to pass.
- 4. The Nursing Student Handbook must be read, and the signature sheet submitted if not done previously. (2021-2022 RN Program Student Handbook pg. 18)
- The Nursing Student Handbook must be read, and the signature sheet submitted if not 5. done previously.
- 6. Satisfactory course attendance (see Nursing Student Handbook for attendance policies and procedures) is required to pass. (2021-2022 RN Program Student Handbook pgs. 17-18)
- 7. Successful completion of NRS 111 is required to progress to NRS 206.

Methods of Evaluation: Final course grades will be computed as follows:

% of final course grade **Grading Components** • Theory Component: 4-unit examinations 60% Mental Health will have 2 guizzes = 1 exam Med-Surg will have 3 exams • Comprehensive Final examination 35% A final grade of 75% must be achieved for successful course completion. A grade of "C" is required for progression to Nursing III. Grades between 74% and 70% will be recorded as a "D". Grades below 70% will be recorded as an "F". Med-Surg/Mental Health Weekly Assignments 5%

The RN Program reserves the right to use any and all standard examinations available that have documented validity and reliability.

- 1. With the exception of the Comprehensive Assessment Examination during NRS 217, the student is expected to achieve a Level 2 on all proctored examinations.
- 2. The student must complete and submit all remediation before attempting another proctored examination.
- 3. If the student is experiencing difficulty it is the student's responsibility to make an appointment to meet with the Instructor/Retention Specialist.

COURSE GRADING NOTES:

A minimum average of 75% must be attained on all unit and final examination; Grades between 74% and 70% will be recorded as a "D". Grades below 70% will be recorded as an "F".

Students are strongly encouraged to visit the Computer Lab and take ATI Practice examinations on the Website (www.ATITESTING.COM) to adequately prepare for the proctored examination.

College Laboratory

- Satisfactory attendance
- Active participation in discussion, demonstration, and practice of skills. The student must show proof of at least 4 practice sessions before testing off of required skills.
 - 1. Complete ATI pre and post-test for assigned skills and bring to lab along with completed skills template & checklist.
 - 2. Without the completed printed forms, the student will be marked absent from the scheduled lab.

Must achieve a P (100%)

Must achieve a P

(100%)

- An 90% on the Medication Dosage Calculations exam. SEE POLICY BELOW.
- Satisfactory attendance
- o Achieve a "Pass" on the final clinical evaluation (see clinical evaluation tool for criteria)
- Successful, on-time completion of:
 - 1. 2 nursing care plans; 1 of which can be the perioperative paper
 - 2. 2 care maps
 - 3. 2 Therapeutic Communication process recordings
 - 4. 1 Health Teaching plan
- Additional evaluative criteria: **Attendance** within the program policy *see the student* handbook.

Medication Dosage Calculation Testing Policy

The medication dosage testing policy exists to ascertain dosage calculation competency essential for safe nursing practice. It is of utmost importance that all nursing students assume personal responsibility for maintenance of math skills throughout the nursing curriculum. The dosage calculation test serves as a means for continued assessment of these important skills by clinical faculty.

The medication dosage calculation test will be given each semester making it a course requirement. The passing score will be 85% for NRS 104/106, 90% for NRS 111/114, NRS 206, and NRS 216. Students who fail to demonstrate proficiency on the first test given in each course will be permitted two (2) retake chances. However, students will be required to remediate with the Retention Specialist or math tutors in the Learning Center and show evidence of the same before attempting another retake. (2021-2022 RN Program Student Handbook pg. 18)

Students will not be allowed to administer medications during clinical rotation until the passing score has been achieved. (2021-2022 RN Program Student Handbook pg. 18) Therefore, students will have three (3) opportunities to achieve the minimum passing score. Failure to achieve the passing score on the medication dosage calculation test will result in an automatic clinical and course failure. (2021-2022 RN Program Student Handbook pgs. 17-18)

Approved by Nursing Faculty 12/2019

Academic Integrity: Dishonesty disrupts the search for truth that is inherent in the learning process and so devalues the purpose and the mission of the College. Academic dishonesty includes, but is not limited to, the following:

- plagiarism the failure to acknowledge another writer's words or ideas or to give proper credit to sources of information;
- cheating knowingly obtaining or giving unauthorized information on any test/exam or any other academic assignment;
- interference any interruption of the academic process that prevents others from the proper engagement in learning or teaching; and
- **Fraud** any act or instance of willful deceit or trickery.

Violations of academic integrity will be dealt with by imposing appropriate sanctions. Sanctions for acts of academic dishonesty could include the resubmission of an assignment, failure of the test/exam, failure in the course, probation, suspension from the College, and even expulsion from the College.

Student Code of Conduct: All students are expected to conduct themselves as responsible and considerate adults who respect the rights of others. Disruptive behavior will not be tolerated. All students are also expected to attend and be on time for all class meetings. No cell phones or similar electronic devices are permitted in class. Please refer to the Essex County College student handbook, Lifeline, for more specific information about the College's Code of Conduct and attendance requirements. See Nursing Handbook

NETIQUETTE GUIDE FOR ONLINE COURSES It is important to recognize that the online classroom is in fact a classroom, and certain behaviors are expected when you communicate with both your peers and your instructors. These guidelines for online behavior and interaction are known as netiquette.

SECURITY Remember that your password is the only thing protecting you from pranks or more serious harm.

- Don't share your password with anyone.
- Change your password if you think someone else might know it.
- Always log out when you are finished using the system.

GENERAL GUIDELINES When communicating online, you should always:

- Treat your instructor and classmates with respect in email or any other communication.
- Always use your professors' proper title: Dr. or Prof., or if in doubt use Mr. or
- Unless specifically invited, don't refer to your instructor by first name.
- Use clear and concise language.
- Remember that all college level communication should have correct spelling

- and grammar (this includes discussion boards).
- Avoid slang terms such as "wassup?" and texting abbreviations such as "u" instead of "you."
- Use standard fonts such as Ariel, Calibri or Times new Roman and use a size 10 or 12 pt. font
- Avoid using the caps lock feature AS IT CAN BE INTERPRETED AS YELLING.
- Limit and possibly avoid the use of emoticons like :)
- Be cautious when using humor or sarcasm as tone is sometimes lost in an email or discussion post and your message might be taken seriously or sound offensive.
- Be careful with personal information (both yours and others).
- Do not send confidential information via e-mail.

EMAIL NETIQUETTE When you send an email to your instructor, teaching assistant, or classmates, you should:

- Use a descriptive subject line.
- Be brief.
- Avoid attachments unless you are sure your recipients can open them.
- Avoid HTML in favor of plain text.
- Sign your message with your name and return e-mail address.
- Think before you send the e-mail to more than one person. Does everyone really need to see your message?
- Be sure you REALLY want everyone to receive your response when you click, "reply all."
- Be sure that the message author intended for the information to be passed along before you click the "forward" button.

MESSAGE BOARD NETIQUETTE AND GUIDELINES When posting on the Discussion Board in your online class, you should:

- Make posts that are on topic and within the scope of the course material Take your posts seriously and review and edit your posts before sending.
- Be as brief as possible while still making a thorough comment.
- Always give proper credit when referencing or quoting another source.
- Be sure to read all messages in a thread before replying.
- Don't repeat someone else's post without adding something of your own to it.
- Avoid short, generic replies such as, "I agree." You should include why you agree or add to the previous point.
- Always be respectful of others' opinions even when they differ from your own.
- When you disagree with someone, you should express your differing opinion in a respectful, non-critical way.
- Do not make personal or insulting remarks.
- Be open-minded.

APPROPRIATE APPEARANCE IN LIVE ONLINE COURSES: Remember that live online courses are to be treated like the in-person classroom.

- Your camera must be on and you must be actively engaged in the class. If not, you will be marked absent for that session.
- Please ensure that you are dressed in a manner that would be equal to your in-classroom attire.
- Please avoid confrontations with anyone in the course. If this occurs, you will be removed from the online environment.

Differently-abled Support Services

Essex County College welcomes students with disabilities into all of the college's educational programs. It is the policy and practice of Essex County College to promote inclusive learning environments. If you have a documented disability, you may be eligible for reasonable accommodations in compliance with college policy, the Americans with Disabilities Act, Section 504 of the Rehabilitation Act, and/or the New Jersey Law Against Discrimination. Please note, students are not permitted to negotiate accommodations directly with Professors, Academic Chairpersons, and Deans. To request accommodations or assistance, please self-identify with the Office of Differently abled Support Services. The office is located in the Student Development and Counseling Department at the Main Campus in Room 4122-I, and on Tuesdays at the West Essex Campus, Advisement Center. Contact us by telephone at 973-877-3071 or by email at disability@essex.edu.

Student Development and Counseling Office Room 4122 ESSEX cares about you. We want to assist you in maintaining your health and wellness as you pursue your academic goals. Asking for help is NOT a sign of weakness. It is a brave and critical step to getting the assistance that you deserve. Whenever you need someone to talk to when you feel overwhelmed, stressed out or feel like you have run out of options, reach out to a counselor:

On the Main Campus between 9:00 am and 6:00 pm, Monday -Wednesday; 9:00 am-5:00 pm on Thursday; 9:00 am-3:00 pm on Friday

Professor Kathlyn Battle 973-877-3284/Battle@essex.edu Professor Jim Johnson 973-877-3371/Johnsonj@essex.edu Professor Victor Stolberg <u>973-877-3129/Stolberg@essex.edu</u>

At any other times, connect 24 hours a day with: Campus Security 973-877-3312 National Suicide Prevention Lifeline 1-800-273-TALK (8255) Emergency 911 Crisis Textline Text "GO" to 741741

Don't give up! It is ok not to be ok. Talk to a Counsellor.

Required Textbooks: All textbooks should be current /latest edition

REQUIRED TEXTBOOKS: All textbooks should be current /latest edition

Hoffman, J. & Sullivan, N. (2020). Medical-Surgical Nursing: Making connections to practice, Philadelphia: FA Davis. ISBN# 978-0-8036-7707-4

Treas, L.S., Wilkinson, J.M., Barnet, K.L., and Smith, M.H. (2018). Basic nursing: Thinking, doing, and caring, 2nd Ed. Philadelphia, FA Davis. ISBN# 978-0-8036-5942-1

Doenges, M.E., Moorhouse, M.F. & Murr, A.C. (2019). Nurse's Pocket Guide, 85th Ed., F.A. Davis ISBN# 978-0-8036-7644-2

Jarvis, Carolyn. (2019). Pocket Companion for Physical Examination and Health Assessment. 8)th Ed. Philadelphia: W. B. Saunders Co. ISBN# 9780323532020

Varcarolis, E.M. (2016) Essentials of Psychiatric Mental Health Nursing, (3rd Ed) St. Louis: Elsevier. ISBN: 9780323389655

A drug handbook – This resource should be the **most up-to-date version** available and should have a CD for future updates!

Any Medical Dictionary

PLEASE NOTE: YOU CAN USE THE ATI RESOURCE FEATURE TO LOOK UP WORD GLOSSARY.

F.A. Davis Advantage Assignments and additional readings as provided by the instructor.

I. **Class Expectations:**

You may expect Us to:

- Arrive to class prepared.
- Provide clear instruction.

- Respect you as individuals
- Encourage you to work hard.
- Return graded tests in a timely manner.
- Encourage you to meet with your instructor early on if you have difficulty with meeting the objectives of the course not towards the end of semester.

We will expect you to:

- Concentrate only on this course during class hours.
- Complete the F.A. Davis pre and post assignments as required
- Do not receive or make phone calls or text messages. TURN OFF all cell phones before entering the classroom and especially during examinations. Placing devices on vibrate is not turned off.
- Arrive to class on time.
- Come to class prepared.
- Ask questions. Questions should be asked in class or during my office hours. Please ask for help before you fall behind.
- No private conversations while class is being conducted.
- Respect the faculty and all your classmates.
- Contact faculty if sick or unable to attend class or clinical.
- Makeup exams will be administered at the end of the semester and will be an **equivalent exam**
- All students are to bring calculators to each class. Cell phones may not be used as calculators.

ESSEX COUNTY COLLEGE DEPARTMENT OF NURSING NRS 111- NURSING II LABORATORY PRACTICE & TESTING POLICY

- 1. Students must enter each laboratory session having completed the required readings and study questions. At the beginning of each session, a brief question and answer period will clarify any confusing content.
- 2. Students will be responsible for viewing the ATI skills video and submitting the ATI Skills checklist template before engaging in practice. Any student without the completed template will not be allowed to practice.
- 3. Each laboratory session will begin with a demonstration of the skill or skills to be learned. A white lab coat must be worn at all times when in the skills lab.
- 4. Students are expected to practice the skill during the remainder of the class time and during additional open laboratory periods.
- 5. Students must practice the skill and show proof BEFORE performing a nursing skill test.
 - Students must show proof of having practiced a skill at least 3 or more times before testing off of required skill. SEE Skills Laboratory Manual for critical elements checklists.
 - b. Students are responsible for making appointments for testing well before the final deadline!
 - c. During test-offs, students will not be able to observe the testing of other students.
 - d. Students are responsible for ensuring that a record of the successful test-off is documented by the laboratory instructor.
 - e. In order to successfully complete or "pass" a lab skill, the student must successfully perform ALL critical elements for the particular lab skill being tested in the time period allotted.
 - f. If the student does not perform all critical elements for a particular skill, the student will be allowed to re-test a second time AFTER all other students have been tested.
 - g. Failure to pass a second time, will result in a written warning, counseling, and documentation of skill remediation.
- 6. If a student fails the skill on the third attempt, the student will fail the laboratory component of the course and thus fail NRS 111-Nursing II.

Laboratory test-off deadlines: Students must successfully test off on the following skills by the deadline stated. Failure to do so will result in laboratory failure and thus failure for the course unless otherwise stated. See critical elements checklist for test off

Intravenous Therapy & Calculations: WEEK 2

Tracheostomy Care: WEEK 3-4

NRS111: ATI Practice Assessments, Tutorials, & Proctored Exams

Computer programs are aimed at assisting the student to clarify, amplify or learn content relevant to Nursing II. The programs listed are offered as a means to strengthen your knowledge. The ATI programs can be accessed from any computer via the internet; open hours for computer room 213-CHS are posted.

Week 1:

Review Tutorials: ACHIEVE modules: Test taking, Study skills, Classroom skills, Preparing clinical experiences, Challenges for ESL students

Tutorials: Pharmacology Made Easy 4.0: Introduction to Pharmacology

Skills Modules 3.0: Blood Administration, 4 Medication Administration; Intravenous Infusion, IV therapy, Central Venous Access Devices, Dosage Calculations 3.0

Skills Modules 3.0: Review Physical Assessment-Adult & Child, Personal Hygiene, Vital Signs **Practice Assessment:** Targeted Medical-Surgical-Perioperative

Week 2

Review Tutorials: Nurse Logic 2.0: Knowledge and clinical judgment, Nursing concepts,

Priority-setting frameworks, Testing and remediation Skills Modules3.0: Oxygen Therapy, Airway Management

Learning System: Medical—Surgical: Oncology

Week 3

Tutorials: Pharmacology Made Easy 4.0 Hematology **Learning System:** Medical-Surgical: Hematology

Week 4

Tutorials: Learning System RN: Respiratory

Tutorials: Pharmacology Made Easy 4.0 Respiratory System

Week 5

Tutorials: Learning System: Pharmacology, Medical-Surgical: Cardiovascular & Hematology

Tutorials: Pharmacology Made Easy 4.0 Cardiovascular System

Learning System: Medical-Surgical: Cardiovascular

Practice Assessments: Targeted Medical-Surgical: Respiratory

Week 6

Tutorials: Review Pharmacology Made Easy 4.0 Endocrine System

Skills Modules 3.0: Diabetes Mellitus Management

Week 7

Learning System: Medical-Surgical Gastrointestinal

Tutorial: Pharmacology Made Easy 4.0 Gastrointestinal System

Skills Modules: Nasogastric tube

Week 8

Tutorials: Pharmacology Made Easy 4.0 Gastrointestinal System

Skills Modules: Enteral Tube Feedings

Practice Assessments: Targeted Medical-Surgical Gastrointestinal

Week 9

Skills Modules: Ostomy Care

Week 10

Focused Review

Week 11

Mental Health

Week 12

Mental Health

Week 13

Mental Health

Week 14

Mental Health

Week 15

Mental Health

Comprehensive Final Exam date TBD

(Please note: The following calendar is a tentative schedule and is subject to change)

111 Course Calendar & Content Distribution:

	Lecture Topics	Nursing Lab-Practice is on student's own time	Clinical Lab
Week 1 3/24/2022	111 Course Orientation Lecture: The Perioperative Experience, (Preop, intraop and post-op nursing care) Treas & Wilkinson: Chapter 40 Hoffman & Sullivan: Chapters 15,16 and 17	Principles of Intravenous fluid administration and calculation for perioperative care. Blood Administration: Central venous lines, PICC Hoffman & Sullivan-Chap. 10 Treas & Wilkinson Chapter 39	On Campus Care of the perioperative patient; Principles of Intravenous Fluid administration and calculation Please Note: The semester begins on 3/23/22 with Clinicals on campus.
Assignment	ATI Assignments Davis Advantage Assignment	ATI PRACTICE ASSESSMENTS	on campus.
Week 2	Lecture:	Lab:	
3/31/2022 Assignments	Alteration in Regulation: Cancer Hoffman & Sullivan Chap 13 ATI Assignments Davis Advantage Assignment	Artificial airway/airway management/tracheosto my care & suctioning ATI Skills Modules: Airway Management Assessment: MDIs, peak flow, PFT, and basic Arterial Blood Gas analysis. Hoffman & Sullivan: Chap 7 DOSAGE CALCULATION EXAM	On Campus Continue principles of Intravenous fluid administration and calculation ATI Skills Module: IV Therapy Review Complete Agency Orientation Forms/Competencies Clinical Agency, Clinical Expectations: Clinical Evaluation Tool, Nursing Care Plan/Map,
			Perioperative Paper, Health Teachings (See Clinical Guide)
Week 3	Lecture:		Clinical Agency
4/7/2022	Coordinating Care for Patients with Hematological		Report to Assigned Agency: Orientation to

	т		
Assignment	Disorders Hoffman & Sullivan Chaps 33 & 34 ATI Assignments Davis Advantage Assignment	Blood Administration: Central venous lines, PICC	Clinical Agencies Assess needs, plan, and implement care for clients with alterations in regulation: Care of the Patient with Cancer and who require IVs (See Clinical Guide)
Week 4 4/14/2022 Assignment	EXAM 1 Lecture: Promoting Health in Patients with Oxygenation Disorders: Hoffman & Sullivan: Chapters 23, 24, 25, 26, 27 Treas & Wilkinson: Chapter 37 ATI Assignments Davis Advantage Assignment	Artificial airway/airway management/tracheosto my care & suctioning Treas & Wilkinson; pages 1408-1419 Tracheostomy care & suctioning Test Off	Clinical Agency Assess needs, plan, and implement care for clients with alterations in regulation: Respiratory disorders (See Clinical Guide)
Week 5 4/21/2022 Assignment	Lecture: Promoting Health in Patient with Circulatory Perfusion Disorders Hoffman & Sullivan Chapters: 28, 29, 30, 31, 32 ATI Assignments Davis Advantage Assignment	Basic ECG interpretation, basic dysrhythmia interpretation Treas & Wilkinson Chapter 37; pages 1363- 1367 Hoffman & Sullivan Chap: 29 ATI PRACTICE ASSESSMENT	Care of the cardiovascular patient Clinical Agency Assess needs, plan, and implement care for clients with alterations in regulation: Cardiovascular disorders (See Clinical Guide)

	T		
Week 6 4/28/2022	Lecture: Promoting Health in Patients with Endocrine Disorders: Diabetes Mellitus Hoffman & Sullivan Chap: 44 ATI Assignments Davis Advantage Assignment	Skills related to Diabetes Mellitus: Blood Glucose Monitoring & Insulin Administration Hoffman & Sullivan DOSAGE CALCULATION EXAM	Clinical Agency Assess needs, plan, and implement care for clients with alterations in regulation: Diabetes
Assignment			
Week 7 5/5/2022 Assignment	EXAM 2 Lecture: Promoting Health in Patients with Endocrine Disorders: Thyroid and Parathyroid Hoffman & Sullivan Chap: 43 ATI Assignment Davis Advantage Assignment	Tube feedings, Hyperalimentation Gastrostomy tubes, feeding pumps Treas & Wilkinson pages 987-1005	Clinical Agency Assess needs, plan, and implement care for clients with alterations in regulation: Endocrine Problems (See Clinical Guide) *MID-TERM EVALUATIONS DUE*
Week 8 5/12/2022	Lecture: Promoting Health in Patients with Gastrointestinal Disorders: Upper Gastrointestinal Disorders Hoffman & Sullivan Chapters: 56, 57	Tube feedings, Hyperalimentation Gastrostomy tubes, feeding pumps and Medication Administration Treas & Wilkinson pages 987-1005	Clinical Agency Assess needs, plan, and implement care for clients with alterations in regulation: Gastrointestinal Disorders (See Clinical Guide)
Assignment	ATI Assignments	ATI PRACTICE ASSESSMENT	

Week 9 5/19/2022	EXAM 3 Lecture: Promoting Health in Patients with Gastrointestinal Disorders: Lower Gastrointestinal Disorders Hoffman & Sullivan: Chapters: 58, 59, 60	Bowel Diversions: Ostomies and ostomy care Treas & Wilkinson: Chapter 29 Pages 1006-1016	Clinical Agency Assess needs, plan, and implement care for clients with alterations in regulation: Gastrointestinal Disorders (See Clinical Guide) GI Disorders
Assignment	ATI Assignments		
Week 10 5/26/2022	Meet with Instructor to discuss Focus Review	SIMULATION: DIABETIC HYPOGLYCEMIA)	
Week 11 6/2/2022	MENTAL HEALTH		
Week 12 6/9/2022	MENTAL HEATH		
Week 13 6/16/2022	MENTAL HEALTH		
Week 14 6/23/2022	MENTAL HEALTH		
6/30/2022 7/7/2022	MENTAL HEALTH	COMPREHENSIVE FINAL DATE TBD	

NRS 111 CLINICAL GUIDE SPRING 2022

NRS 111 CLINICAL REQUIREMENTS

Written Requirements:

- 1. All written work is to be submitted on the day designated by the clinical instructor.
- 2. A care plan or Perioperative paper is **due** for the clients **cared for** during the **weeks of your medical-surgical rotation as assigned by the clinical instructor.** After assessing the client, the student should identify **all** relevant Nursing Diagnoses and list them on the Assessment form. A care plan or care map should be developed for **three priority** Nursing Diagnoses/Problems. The Perioperative paper will take the place of one (1) care plan.
- The student is responsible for explaining all medication information related to one's client.
 Written medication information is expected with each care plan. A maximum of eight medications will be required.
- 4. Two process recordings are **due** for your assigned patient during the weeks of Psych/mental Health rotation. See the Clinical Guide: <u>Therapeutic Communication</u>.
- 5. <u>Health Teaching Assignment</u> is **due** for the clients **cared for** during the weeks of medical-surgical rotation as assigned by your clinical instructor.

Behavioral Requirements: (See Nursing Student Handbook)

1. Absence

If the student must be absent from clinical, it is the student's responsibility to call the clinical unit and the college to report the absence for that day. The student must meet with the clinical instructor upon return to class to determine how to meet the clinical objectives for the day(s).

2. Lateness

Arriving late in the clinical area and submitting late written work is not tolerated without justifiable reason. If the student cannot arrive to the clinical area on time, or cannot submit written work on schedule, the student should notify the clinical instructor. Persistent lateness, for whatever reason will result in clinical failure. **See Nursing Student Handbook**

3. Appearance and Equipment

See Nursing Student Handbook

4. Performance

The student is responsible for the application of all previously learned skills and theory. One must be prepared to discuss the client's medical and nursing diagnoses and plan of care, including medications. If not prepared, the student will be counseled verbally and in writing.

Persistent lack of preparation will result in clinical failure. The student must obtain an 80% on the ATI Dosage Calculations proctored exam. If unsuccessful after 1st attempt, students must attend mandatory remediation. If after two attempts the student does not achieve an 80%, the student will not be able to administer medications in the clinical area and will therefore **Not** achieve the course objective. **NOT** achieving the medication course objective will constitute a clinical failure.

NRS 111 Clinical Guide Therapeutic Communication

This assignment is to be submitted during the weeks of Psych/Mental Health rotation:

- 1. Assess, plan and implement care for the client to which you have been assigned.
- 2. Write a process recording based on a 5-minute segment of a therapeutic conversation that you have had with your client.

Guidelines:

- a. Introduce myself to clients.
- b. Determine appropriate time and place to talk with your client.
- c. Initiate a simple conversation as you interact with your patient. E.g., the weather, in the news, Current events, a special Holiday (past, present or future), a book read, special foods etc. (Stay away from religion or politics).
- d. Note your body language and that of your client.
- e. Following the interaction, leave the room and record what was said by you and the assigned client, (Verbatim).

Analyze your response by determining if the conversation was indeed therapeutic. If it wasn't stated what you could have said to encourage the expression of your client's feelings about him or herself in the analysis section. Use your textbook and the NRS 107 handout on Therapeutic Communication to help you to analyze your responses.

Verbatim Student	Verbatim Client	Therapeutic	Non Therapeutic	Student's Analysis/ Why

ESSEX COUNTY COLLEGE NURSING DEPARTMENT NRS 111

Guidelines for giving oral clinical report

Client Report				
Client's name	Room #	Sex	Date	
DNR YesNoDate				
Primary Diagnosis (s)				
Reason for admission				
Surgery (This admission) Date	Ту	pe	# days post op	
Current medical problems being	treated			
1)				
2)				
3)				
4)				
Scheduled for any diagnostic tes	ts (When reas	on for)		
Scheduled for any diagnostic tes	is (when, reaso	יוו זטו יו		
Nursing objectives for today				
First Priority				
1				
Reason Second Priority				
2)				
Reason				
Third Priority				
3)				
Reason				
Identify if you client has pain me	edication ordere	?d?		
				
Identify if your client requires ar	ny medication fo	or howel fun	ctionina?	
Identify if your client requires an	-	-	_	
Identify if your client requires an	-	-	_	
	-	-	_	

1)		2)
	3)	
	4)	
NEURO ASSESSMENT: Level of Consciousness: Alert		
Lethargic		
		
Other		
Body Position Fowler's_ Side rails 42	BRPOOB Semi-Fowler'sFlat 1none No if yes, know fall precaution policy	
Restraints Yes No	Renewal date	
RESPIRATORY ASSESSMEN	<u>ıT</u>	
RateRhythm	Work of Breathing	
Lung Sounds		
Oxygen Therapy		
Nasal Cannula:LPM	Pulse Ox	%
Mask Type- RB Non-	RB Liter Flow %delivered	
Ventilator Mode CMV	IMVCPAP	
FIO2	% Tidal Volume cc	
	VentilatorClient's rate	
PEEP	cm's Pressure	
Suctioning ColorCon	sistencyAmt	
CARDIAC ASSESSMENT		
Pulse Rate & Rhythm	Heart sounds	
Pulses <u>Strong</u> <u>Weak</u>		
Radial		
Pedal		
	Level #Site (if yes) Character_	
Radiating to		
Medications given	Time administered	
ECGs: Yes No	Date last taken/ result	
INTRAVENOUS THERAPY		
Solution # 1	Solution #2	

Infusion Rate	Infusion Rate		
Site of Infusion			
Amount in Bag	Amount in Bag		
Peripheral Infusion site	Peripheral Infusion Site		
Central:	Central:		
Subclavian	_		
Jugular	Jugular		
Other	Other		
Piggybacks	Time due		
			
GASTROINTESTINAL ASSESSMENT			
Abdomen			
	Normal Hyperactive		
Last Bowel Movement BM Col	or Consistency Amt		
	ColorConsistency		
Amount	· · · · · · · · · · · · · · · · · · ·		
NGT/ PEG Tube Feeding Type			
Infusion Rate Residual			
URINARY ASSESSMENT	_		
Voiding: Yes_ No Color_			
Catheter: FoleyTexasSupr	· ———		
Date inserted Catheter size_			
Color	Amount		
SKIN ASSESSMENT			
Skin intact			
Decubitus SiteStage_	Size		
Treatment			

*In the clinical sites use the SBAR format for hands off communication according to agency policy.

ESSEX COUNTY COLLEGE RN NURSING DEPARTMENT

NRS 111 PERIOPERATIVE EXPERIENCE Observational Experience Objectives and Written Assignment

This assignment is to be completed 2 weeks after your observational experience in the operating room and post-anesthesia unit

Main Objectives:

- 1. Explain the nursing responsibilities related to teaching a client during pre and postoperative period.
- 2. Explain how the basic physiological and psychosocial needs of a client are met
 - a. in the operating room and
 - b. in the recovery room.
- 3. Describe the role of the nurse during the immediate and longer term post-operative period.
- 4. Describe the discharge planning and teaching of a client who undergoes surgery.

POINTS CRITERIA:

- 1. If possible, observe a major surgical procedure.
- 5 2. Obtain the following data related to the client that you have observed:
 - Patient initials
 - Age, gender, marital status
 - Medical diagnoses or past medical history
 - Name of the surgical procedure
- 3. Research the surgical procedure in a textbook or over the internet and give a brief account of how the anatomy and physiology are altered either positively or negatively as a result of this surgery.

 (This should be approximately one typewritten page.)
- 4. Write a preoperative teaching plan that relates to and is specific for the surgery observed. The plan must be specific to the actual surgical observed. You can use the column format example as shown below but is not mandatory.

Goals Interventions Expected outcome

Client will participate in Preop activities to minimize Post –op complications by (Date TBD).

- 5. Throughout your observation of the client undergoing surgery, take notes or remember how the client's needs for the following were met.
 - Bacteriological safety
 - Medical/thermal safety
 - Oxygen
 - Fluid needs (identify all solutions used)
 - Elimination
 - Pain and comfort needs (name the drugs used pre-and Intraoperatively
 - List the members of the surgical team and describe their responsibilities.
- 7. List the nursing actions of the post anesthesia unit nurse and state the rational for each intervention. Must be specific to the PACU and surgery performed.
- 8. List the postoperative nursing interventions that would be appropriate if you were caring for this client on a post-op nursing unit. List the rationale for each nursing intervention.
 - 9. List 2 potential postoperative complication directly related to the surgical procedure performed.
- 10. Research from the literature, the discharge and home care planning, and discharge teaching necessary for this client in relation to this type of surgery.

Directions for writing the paper-APA Format required

- 1. Type the information obtained in items 2-10 in the form of a research paper.
- 2. Information obtained for textbooks, journals or the internet MUST include references i.e. if you paraphrase or take a direct quote from a source other than yourself, you must cite the source in APA style. If material is not referenced, it will be returned for correction.
- 3. 5 other references are required in addition to the textbook.
- 4. 5 or more grammatical and or spelling errors will be returned for correction.
- 5. The paper is **due 14 days** after the observational experience. An extension may be granted per permission of the clinical instructor.

5

Grading:

- 1. The paper will be graded Satisfactory or Unsatisfactory.
- 2. A grade of Satisfactory can be obtained by the following in a complete manner: the directions for writing the paper, which are listed above and by obtaining a total of 75 points.
- 3. If a paper is graded Unsatisfactory, the student will have one (1) week to correct the deficiency for regarding. If the paper is unsatisfactory after regarding, a grade of F will be assigned. This will result in a clinical failure of the course.

http://www.apastyle.org/learn/tutorials/basics-tutorial.aspx View tutorial for cover page, abstract, text and references

Essex County College Department of Nursing HEALTH TEACHING PLAN GUIDELINES

PURPOSE:

To provide the student with the opportunity to plan and implement an educative/supportive method of nursing care for an individual/family/group.

GUIDELINES:

- Select an individual/family/group who demonstrates a knowledge deficit (example: one which threatens their achievement of a maturational or situational task. (10pts)
- Complete a brief nursing history to substantiate the client's need for educative/ supportive intervention. Identify the client's strengths and limitations in meeting the therapeutic self-care demand and documenting the nursing diagnosis. (20pts)
- 3. Develop a teaching plan which includes: (40pts)
 - a. Specific client/focused learning objectives; at least 2.
 - b. Topical outline of content material;
 - c. Planned teaching strategies and learning activities
 - d. Time frame for planned activities; and
 - e. Evaluation criteria.
- 4. Implement the teaching plan. (10pts)
- Evaluate the effectiveness of the teaching plan in achieving learning objectives using established evaluation criteria, including actual or suggested adaptations (if appropriate) to original plan. Include rationale of positive or negative responses to your plan. Any reinforcement or new approaches needed. (20pts)

Students must achieve a 75 and above in order to receive a satisfactory/ passing grade.

HEALTH TEACHING PLAN FORM (EXAMPLE)

Student			Date
Clients initials	Age	Instructor	

OBJECTIVE	Content	Teaching Learning Activities	Time Allotment	Evaluation Method
By the end of this lesson,	Introductions Relaxation	Discussion question "What does	20 min. session	
client will be able to:	Definitions	relaxation means to you?" Discuss the		
	Balance with exercise	relationship between stress and blood		
Select from a list three	Benefits	pressure. Give the patient the pamphlet:		
Benefits of relaxation	Reduce blood pressure	Balancing Relaxation and Exercise.		
(Cognitive).	Reduce tension			
	Increase efficiency	Discuss fears and mixed feelings.	10 min. session	
Agree to experiment with		Question: "Who else in you family has		
Walking and various	<u>Medication</u>	been diagnosed with hypertension?		
relaxation techniques	Fears	What did it do to them? What		
(Affective).	Side effects	have they done to control it, and what		
		were the results?"		
Count his pulse within three				
beats of what the nurse	Costs	Demonstrate pulse taking. Have the		
counts (Psychomotor.)	Benefits	client return demonstration of pulse		
		taking.	30 min. session	
	Techniques for pulse taking	Develop a record keeping system for		
	Location of artery	monitoring pulse rate.		
	Finger placement			
	Counting	Read directions for deep breathing, yoga,		
	Multiplying	meditation, and imagery.		
	Recording method	Obtain a clock		
	_	with a second hand.		
	Technique for relaxation	Develop a chart for		
	Deep breathing	record-keeping at home.		
	Yoga	Obtain an audio cassette for recording		
	Medication	directions for deep breathing	20 min. session	
	Imagery	yoga, meditation, and imagery.		
	Prayer	Have the client select soothing prayers.		
	Wrap up			

CLIENT ASSESSMENT (To accompany teaching plan)

Students' Name		Date	
Agency			
Client's Initials Age	Sex	Department	
Assessment/Data Collection	<u>on</u>		
Pertinent Client Data			
Subjective:			
-			
Objective:			
Assessment/Analysis			
Nursing Diagnosis (Knowled	lge deficit related to)		
Clients Assets and Limitatio	ns (relative to knowledg	e deficit)	
ASS	ETC		LIMITATIONS
ASS	<u> </u>		LIMITATIONS

HEALTH TEACHING PLAN FORM

Student	Date	Clients initials
Nursing Course	Instructor	
Facility	Age	
	_ ''0'	

GOAL:					
(Psychomotor)	(C) (P) (A)	Content	Teaching Learning Activities	Time Allotment	Evaluation Method

ESSEX COUNTY COLLEGE

DEPARTMENT OF NURSING

NURSING II Laboratory Syllabus NRS 111

2021-2022 Dev 2015; Rev 2022

Week 1 and 2: Meeting the Need for Safety: I.V. Medication Administration

Unit Objective:

The student will utilize safe and appropriate nursing skills when caring for clients who are receiving intravenous medications.

Learning Outcomes:

Upon completion of this lab, computer-assisted instruction and the assigned reading, the student will:

1. Define the following terms:

Heparin Lock Piggy-back Drug incompatibility
Heparin flush Diluent Allergic reaction

Primary I.V. Volume control device

- 2. Demonstrate appropriate nursing actions when initiating administration of I.V. medications.
- 1. Identify nursing responsibilities during administration of I.V. medications.
- 2. Calculate and regulate I.V. flow in accordance with Physician's order in drops/minute.
- 3. Record I.V. medication administration on medication record and I&O sheet.
- 4. Demonstrate nursing actions required after I.V. Medication has been infused.
- 5. Explain complications of I.V. medication administration.
- 6. Demonstrate nursing skill of changing I.V. solution, I.V. tubing, and dressing of primary I.V. tubing, and dressing of primary I.V. site.
- 7. Explain signs and symptoms of an allergic reaction.

Skills:

- 1. Identify equipment.
- 2. Read Physician's order.
- 3. Dilute powder medication with diluent.
- 4. Prepare appropriate I.V. medication and prime tubing.
- 5. Initiate administration of I.V. medication to I.V. tubing and heparin lock.
- 6. Calculate and regulate drop flow rate.
- 7. Record infusion on nurse's note, and medication record.
- 8. Terminate I.V. medication from I.V. tubing and heparin lock.
- 9. Change I.V. solution, tubing and site dressing.

Required Reading:

Hoffman & Sullivan Chapter 10 Treas & Wilkinson: Chapter 39

Audio-Visuals:

ATI Skills Modules 3.0: Administration of I.V. Medications; IV Therapies and Peripheral Access".

Simulation Lab- General Assessment, Vital signs, Lung Sounds, Bowel sounds

<u>Evaluation:</u> Return Demonstration and completion of IV test off

WEEK 3 Coordinating Care for Patients with Hematological Disorders: Blood Administration & Central Venous Catheters

Learning Outcomes:

Following the completion of this lab and the assigned readings, the student will:

1. Define the following terms:

Blood transfusion hemolytic reaction
Blood group agglutination
Autotransfusion hemolysis
Hemorrhage universal donor
Plasma universal recipient

Antibody antigen
Rh factor HLA system

Triple lumen catheter

- 2. Explain the indications for a blood transfusion.
- 3. List the four main groups and two RH groups of human blood.
- 4. Describe the blood products and indications for their use.
- 5. Demonstrate the nursing procedure of initiating, maintaining and terminating a blood transfusion.
- 6. Differentiate the various types of transfusion reaction according to clinical signs and symptoms, nursing and medical interventions and expected outcomes
- 7. Summarize the nursing responsibilities of caring for a client who is receiving a blood transfusion.
- 8. Identify different types of CVC catheters
- 9. Apply Sterile Dressing technique of vascular access devices

Skill: Blood Administration

Required Reading

Hoffman & Sullivan: Pages 161-172

Treas & Wilkinson: Pages 1482-1493, 1515-1526

ATI Skills Module 3.0: Blood Administration; Central Venous Access Device

ATI Skills Module 3.0 Virtual Scenario: Blood Transfusion

Practice previously learned skills:

I.V. Therapy

WEEK 4 Promoting Health in Patients with Oxygenation Disorders: Care of the Client with an Artificial Airway, Interpretation of Basic Arterial Blood Gases (ABG)

Learning Outcomes:

Following the completion of this lab and the assigned readings, the student will:

1. Define the following terms:

Artificial airway Tracheostomy
Intubation Hyperoxygenation
Suctioning Hyperventilation

- 2. Explain the indications for artificial airways
- 3. Identify proper placement of artificial airway:
 - a. Oropharyngeal
 - b. Nasopharyngeal
 - c. Endotracheal
 - d. Tracheostomy
- 4. Demonstrate nursing care related to clients with artificial airways:
 - a. assessment of client
 - b. position of client
 - c. oral and nasal hygiene
 - d. tube maintenance and anchoring
 - e. monitoring cuff pressure
 - f. oxygen therapy
 - g. suctioning of secretions
 - h. Tracheostomy hygiene
 - i. complications of artificial airways
- 5. Compare and contrast nursing care for clients with endotracheal tubes and tracheostomy tubes.
- 6. Explain nursing responsibilities for discharge and community care for clients with tracheostomy.
- 7. Interpret basic arterial blood values
 - a. Respiratory Acidosis
 - b. Metabolic Acidosis
 - c. Respiratory Alkalosis
 - d. Metabolic Alkalosis

<u>Skills</u>

- 1. Suctioning Technique-Open & Closed Suctioning
- 2. Tracheostomy Care

Required Readings: Hoffman & Sullivan Chapter 7 pp 80-99

Treas & Wilkinson Chapter 37 pg 1378-1380; 1385-1390; 1416-1408-1429

Hoffman & Sullivan Chapter 9

Treas & Wilkinson: Chapter 39 pg. 1472-1475-

<u>Audio Visuals</u>: ATI Skills Module: Airway Management <u>Evaluation</u>: Return demonstration and test –off

WEEK 4 – ASTHMA SIMULATION

Learning Outcomes:

Upon completion of this lab, video viewing and assigned reading, the student will:

• Demonstrate competencies outlined by the NCSBN clinical judgment model by applying learned knowledge and principles of airway management to care for the simulation client experiencing acute asthma exacerbation.

Skills:

SIMMAN SIMULATION:

Required Reading

Evaluation:

- 1. Student & Faculty Simulation Evaluation Survey
- 2. Continue practice on identification and interpretation of situations involving patients having an asthma attack.

WEEK 5- Coordinating Care for Patients with Cardiac Dysrhythmias

Learning Outcomes:

Upon completion of this lab, CAI and assigned reading, the student will:

- 1. Discuss the unique properties of cardiac cells
- 2. State the components of a normal ECG complex.

PR interval, QRS, ST, QT

3. Identify the following basic dysrhythmias on an ECG tracing:

Sinus Tachycardia Atrial Fibrillation

Sinus Bradycardia Premature Ventricular Complex

Sinus Arrhythmia Ventricular Tachycardia
Premature Atrial Complex Ventricular Fibrillation

Atrial Flutter Heart Blocks

- 4. Calculate heart rate and rhythm from an ECG tracing.
- 5. Identify appropriate nursing interventions for each of the basic dysrhythmias.
- 6. Differentiate cardioversion from defibrillation.

Skills:

- 1. To measure correctly each time interval of an ECG complex.
- 2. To compute the cardiac rate on an ECG tracing.
- 3. Interpret basic dysrhythmias and plan appropriate interventions

Required Readings:

Hoffman & Sullivan: Chapter 29

Audio-Visual: TBA

WEEK 6 – Promoting health in Patient with Endocrine Disorders: Diabetes Mellitus Skills related to Diabetes Mellitus: Blood Glucose Monitoring & Insulin Administration.

Learning Outcomes:

Upon completion of this lab, the film viewing and the assigned readings: the student will:

- 1. Set up calibration of the glucose monitor device.
- 2. Apply proper procedure of obtaining capillary blood glucose

Test with a glucose monitoring device.

- 3. Demonstrate accuracy when reading U-100 insulin syringe and correct administration of insulin according to prescribed dosage.
- 4. Apply correct procedure for mixing two different insulin preparations into one syringe.

Skill:

- 1. Perform capillary blood glucose monitor check on human volunteers.
- 2. Prepare the correct dose of insulin and administer it into the mannequin.
- 3. Mix two different types of insulin in one syringe.
- 4. SIMMAN Simulation: The Client with Insulin Injection

Required Reading:

Treas & Wilkinson: Pages 984-987

Audio-visuals

http://www.bd.com/us/diabetes/page.aspx?cat=7001&id=7258

Go to the Diabetes Learning Center-Syringes, methods of administration, mixed insulin, insulin pharmacology

ATI Skills Modules: Diabetes Management

Week 8 Alteration in the Need for Fluid: Tube Feedings, Hyperalimentation

Learning Outcomes:

Following the completion of this lab and the assigned readings, the student will:

1. Define the following terms: Hyperalimentation

Total parenteral nutrition (TPN)

Catabolic Subcutaneous emphysema

Negative nitrogen balance

Anabolic

Hyperglycemia

- 2. Identify the ingredients of total parenteral nutrition.
- 3. Recognize different sites for administration of TPN
- 4. Explain the indications for use of TPN solutions and its complications
- 5. Relate the nursing process to the care of the client receiving TPN.
- 6. Formulate a nursing process on the care of clients with central venous catheters (CVC) and PICC lines.

Skills

Required Reading:

Hoffman & Sullivan: Chapter 10 pages 171-172

Treas & Wilkinson: Chapter 28 pg 975-976; 998-1004; Chapter 29

WEEK 8 - Meeting the Need for Nutrition: Tube feeding, Gastrostomy tubes

Learning Outcomes:

Upon completion of this lab, film viewing, CAI and the assigned readings, the student will:

1. Define the following terms:

Malnutrition Gavage vs. Lavage
Calorie Gastrostomy tube
Emesis Kangaroo pump
Projectile vomiting Jejunostomy tube

Regurgitation Percutaneous Endoscopic Gastrostomy (PEG)

Nasogastric intubation

- 2. Describe the types, etiology, pathophysiology, clinical manifestations, diagnostic studies, and therapeutic and nursing management of malnutrition.
- 3. Explain indications for gastric gavage.
- 4. Demonstrate the nursing measures to check for the correct position of the nasogastric tube.
- 5. Apply the nursing process to clients who receive continuous nasogastric and gastrostomy tubes.
- 6. Illustrate the nursing implications for administering medications through a nasogastric and gastrostomy tube.
- 7. Explain the complications of nasogastric and gastrostomy feedings and the appropriate nursing interventions to prevent complications.
- 8. Demonstrate the use of a feeding pump.

Skills:

Check or placement of the NG tube Set up and initiate single tube feeding Prime kangaroo pump Record I & O

Required Reading:

Treas & Wilkinson: Chapter 28 pg. 969 – 977; 992-996; Chapter 25, 830-832

Audio-Visual:

ATI Skills Modules: Nasogastric Intubation & Enteral Tube Feeding

Week 9 - Alteration in the Need for Fecal Elimination: Bowel Diversion/Ostomies

Learning Outcomes:

Following the completion of this lab and the assigned readings, the student will:

1. Define the following terms:

Ostomy effluent Kock pouch lleostomy Stoma Sigmoid Ureterostomy Colostomy Peristomal

- 2. Identify the different anatomic location of all intestinal ostomies & relate the location to the character and management of fecal drainage.
- 3. Describe three types of stoma constructions.
- 4. Discuss assessment parameters of the bowel diversion ostomy.
- 5. Relate nursing diagnoses, goals, interventions and outcome criteria to the client who has a bowel diversion ostomy.
- 6. Apply the skill of changing a bowel diversion ostomy appliance.
- 7. Demonstrate skin care of the peristomal area.
- 8. Identify the purpose of the colostomy irrigation.

Skills:

1. Changing a bowel diversion ostomy appliance.

Required Reading:

Treas & Wilkinson: Chapter 29 pages 1012-1014; 1047-1053;

<u>Audio-Visuals</u>:

ATI Skills Modules: Ostomy Care

Week 10- SIMULATIONS: DIABETIC HYPOGLYCEMIA

Learning Outcomes:

Upon completion of this lab, video viewing and assigned reading, the student will:

- Demonstrate competencies outlined by the NCSBN clinical judgment model by applying learned knowledge and principles of metabolic alterations to care for the simulation client experiencing diabetic hypoglycemia.
- Identify the appropriate assessment parameters and select appropriate nursing interventions.
- Promote communication skills with healthcare team members in care of the patient with hypoglycemia
- Work effectively with nursing and interprofessional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care of the patient experiencing hypoglycemia.
- Apply content with skills when caring for patient with hypoglycemia

Objectives:

Student will be able to:

- a. Recognize signs and symptoms of hypoglycemia (Cognitive)
- b. Identify appropriate interventions for a patient with hypoglycemia (Cognitive)
- c. Initiate appropriate interventions such as maintaining IV, medication administration, obtaining Glucometer reading (Psychomotor)
- d. Performs age-appropriate assessment and provides patient and family education related to Diabetes (Psychomotor).
- e. Identify factors that increase risk for hypoglycemia (Affective)
- f. Perform self-reflective evaluation (Affective)

SIMMAN SIMULATION:

Required Reading:

Evaluation:

- 1. Student & Faculty Simulation Evaluation Survey
- 2. Continue practice on identification and interpretation of situations involving patients experiencing a hypoglycemic event.

WEEK 1: Mental Health Lab/ IV Lab; Clinical on Campus

WEEK 2: Mental Health Lab/ IV Lab; Clinical on Campus

WEEK 3: Mental Health Lab

WEEK 4: Mental Health Lab

WEEK 5: Mental Health Lab

EXHIBIT "G"

Syllabus Version 3

Methods of Evaluation: Final course grades will be computed as follows:

Grading Components

% of final course grade

Theory Component: 4-unit examinations Mental Health will have 2 quizzes = 1 exam Med-Surg will have 3 exams

60%

40%

Comprehensive Final examination

A final grade of 75% must be achieved for successful course completion. A grade of "C" is required for progression to Nursing III. Grades between 74% and 70% will be recorded as a "D". Grades below 70% will be recorded as an "F".

ATI Proctored Examination (Mental Health) Med-Surg Weekly Assignments and Quizzes

The RN Program reserves the right to use any and all standard examinations available that have documented validity and reliability.

- 1. With the exception of the Comprehensive Assessment Examination during NRS 217, the student is expected to achieve a Level 2 on all proctored examinations.
- 2. The student must complete and submit all remediation before attempting another proctored examination.
- 3. If the student is experiencing difficulty it is the student's responsibility to make an appointment to meet with the Instructor/Retention Specialist.

COURSE GRADING NOTES:

A minimum average of 75% must be attained on all unit and final examination; Grades between 74% and 70% will be recorded as a "D". Grades below 70% will be recorded as an "F".

Students are strongly encouraged to visit the Computer Lab and take ATI Practice examinations on the Website (www.ATITESTING.COM) to adequately prepare for the proctored examination.

College Laboratory

- Satisfactory attendance
- o Active participation in discussion, demonstration, and practice of skills. The student must show proof of at least 4 practice sessions before testing off of required skills.
 - 1. Complete ATI pre and post-test for assigned skills and bring to lab along with completed skills template & checklist.

Must achieve a P (100%)

EXHIBIT "H"

Syllabus Version 4

Methods of Evaluation: Final course grades will be computed as follows:

Grading Components

% of final course grade

Theory component four-unit exams
 Mental Health will have 2 quizzes= 1 exams
 Med-Surg will have three examinations

60%

35 %

Comprehensive Final examination

A final grade of 75% must be achieved for successful course completion. The final examination will include a mental health exam. A grade of "C" is required for progression to Nursing 206. Grades between 74% and 70% will be recorded as a "D". Grades below 70% will be recorded as an "F".

Mental Health Weekly Assignments, Practice Test and ATI Modules 5%

ATI Proctored Examination (Mental Health)

The RN Program reserves the right to use all standard examinations available that have documented validity and reliability. All students in NUR 111 are required to take the ATI Proctored Exam as part of the line of study for the course. Students are required to review their performances Profile for all Practice test and Proctored exams in ATI.

- With the exception of the Comprehensive Assessment Examination during NRS 217, the student is expected to achieve a Level 2 on all proctored examinations.
- 2. Immediately on completion of the exam. Students below level 2, are responsible for remediations. The student must complete and submit all remediations and make an appointment with the instructor to review all the material used including notes, flash cards and ATI remediation's template. The student must obtain approval in writing before attempting another proctored examination. Please consult the student handbook
- If the student is experiencing difficulty, during the course, it is the student's responsibility to make an appointment to meet with the Instructor/Retention Specialist for advisement.

EXHIBIT "I"

Mental Health _ATI proctored exam result

73.3%

RN Mental Health 2019

Individual Name: ALANDRE GONEL Adjusted Individual Total Score:
Student Number: 900098721 ATI Proficiency Level:

Student Number: 900098721 ATI Proficiency Level: Level 2
Institution: Essex County College ADN National Mean: 69.8%

Program Type: ADN Program Mean: 69.0% Test Date: 7/5/2022 National Percentile Rank: 63

Program Percentile Rank: 67

	#	Individual	Mea	an	Percent	ile Rank			Ind	ividu	ıal S	core	<u> </u>	Cor	rect)		
Sub-Scale	Points	Score	National	Program Type	National	Program Type	1	10	20	30	40	50	60	70	80	90	10
Management of Care	13	84.6%	78.0%	77.5%	76	78									4	A	
Safety and Infection Control	4	50.0%	N/A	N/A	N/A	N/A											
Health Promotion and Maintenance	3	33.3%	N/A	N/A	N/A	N/A				A							
Psychosocial Integrity	30	80.0%	71.0%	69.9%	78	82									A		
Basic Care and Comfort	1	100.0%	N/A	N/A	N/A	N/A											A
Pharmacological and Parenteral Therapies	6	50.0%	54.8%	54.0%	55	56						A					
Reduction of Risk Potential	3	66.7%	N/A	N/A	N/A	N/A								A			

NOTE: N/A indicates where means and percentile ranks are not presented for sub-scales with

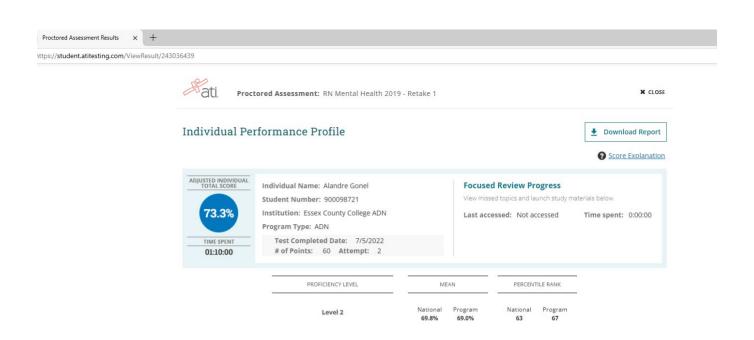


EXHIBIT "J"

ATI Comprehensive Final Exam Result (Spring 2022)

This exhibit shows the Plaintiff's actual grade on the ATI platform for the final comprehensive exam compared to what the school gave him as final grade, as shown on last page.

Individual: Performance Profile Document 1 Filed 02/03/25 NRS 111 SPRING 2022 COMPREHENSIVE FINAL EXAM



No of Individual

Individual Name: ALANDRE GONEL Individual Score: 72.2%

Student Number: 4505630

Institution: Essex County College ADN

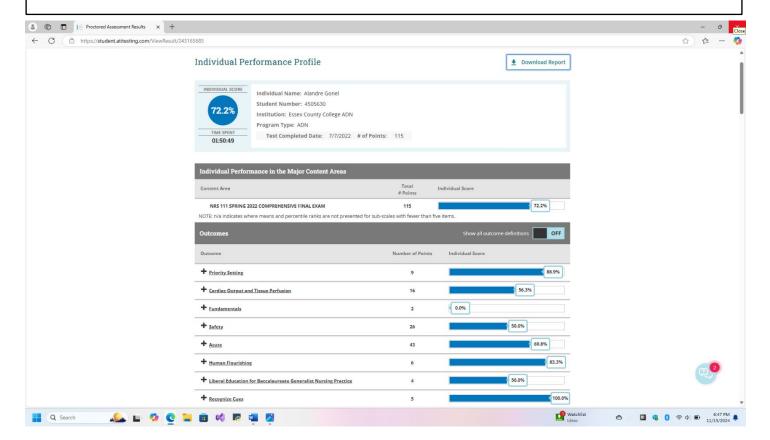
Program Type: ADN

Test Date: 07/07/2022

Overall Performance

Individual Score (% Correct)

Assessment Name	# Points	Individual Score	1 10 20 30 40 50 60 70 80 90 99
NRS 111 SPRING 2022 COMPREHENSIVE FINAL EXAM	115	72.2%	



You are logged in as Alandre Gonel (Log out)

Tutoring

Faculty Resources

Adjunct Email

Webservices Bookstore

ECC Library

English - United States (en_us)

English - United States (en_us)

English (en)

Data retention summary

EXHIBIT "K"

Performance Review Sheet

Grade used by professor Natalee and professor Chapman to calculate

Plaintiff's assignment grade.

Paragraph 2, Line 1.

Paragraph 3, Line 3.

Alandre Gonel NRS 111 Performance Review Meeting 6/30/2022 at 4:00pm-via Zoom Meeting Platform Attendees: Alandre Gonel, Prof. N. Smith, Prof. Chapman

Grades Overview

Exam $1 = 78 \times 0.15 = 11.70$

Exam $2 = 71 \times 0.15 = 10.65$

Exam 3 = 76 x 0.15 = 11.40

Exam $4 = 63 \times 0.15 = 9.45$

Exam totals 43.2 (divided by 60%) = 72% for Unit Exam Totals

5% Assignments = 85.87 x 0.05 = 4.29 35% Finals. = 80 x 0.35 = 28.00

Overall Course Score Calculation

Unit Exams/60 = 43.20 Assignments/5 = 4.29 Comprehensive Finals/ $\frac{35}{2}$ = $\frac{28.00}{2}$ Totals Score/100. = 75.49

EXHIBIT "L"

Assignment Grade Breakdown

With the exception for the highlighted point of 0.23 that appears at the beginning of page 6 for Cumulative Assignment Grade for Mental Health, the remaining Contribution to Course Total (from page 2 to page 5) are grades given for Med/Surg assignments.

8/11/22, 1:、 M

202203_NRS_111_001: Activity report (grade)

Dashboard / Grades / 202203_NRS_111_001 / User report All Hierer results relate to medison

Dr Jeita -	Calculated	ants.	p	n _{erco} mbogo	Letter gveds	an estroph	Contribution to course total
NRS_111_001 LPN	MOBILITY II						
NetTutor - Free online tutoring 24 hours per day. I days a week!	•		-				-
ক্র্ <u>Attendance</u>	0.00 %	100.00 (100.00)	0-100	100.00 %	A		0.00 %
Unit Exam							
	25.00 %	78.46 % (51.00)	0-65	78.46 %	C+		11.77 %
<u> </u>	25.00 %	70.67 % (53.00)	0-75	70.67 %	С		10.60 %
Unit Exam 3	25.00 %	76.00 % (57.00)	0–75	76,00 %	C+		11.40 %
MENTAL HEALTH UNIT EXAM 4 (2 QUIZZES)	25.00 %	63.00 % (63.00)	0-100	63.00 %	D		9.45 %
$\widetilde{\chi}'$ Unit Exam total Weighted mean of grades.	60.00 %	72.03 % (72.03)	0–100	72.03 %	^ c		-
Assignments							
ATI Practice Assessment:	4.55 %	0.00 % (0.00)	0–100	0.00 %	F	This is not the correct assignment, please resubmit.	0.00 %

https://moodle.essex.edu/course/user.php?mode=grade&id=57820&user=3503

e Fri		Calculated				Letter		Contributio to course
Grade ite	em	weight	Grade	Range	Percentage	grade	Feedback	total
. 0	: FA avisAdvantage ssignment:	4.55 %	100.00 % (60.00)	0-60	100.00 %	A	This assignment is designed to be instructive and not punitive, so credit is given for completing it in its entirety. I hope the clinical judgment assignment was sufficiently challenging!	0.23 %
<u>::</u>	FA	4.55 %	100,00	0-60	100.00 %	A	This assignment is designed to be mith active and not punitive, so credit is given for completing it in its entirety.	0.23 %
As Pr	Group signment: eoperative sse Study	4.55 %	93.33 % (14.00)	0–15	93.33 %	A .	Please recall the class discussions of the case study for your responses for numbers 5, 10, 12.	0.21 %
As	्रो.µaVIS ssignment	4.55 %	100.00 % (20.00)	0-20	100.00%	Ą	This assignment is designed to be instructive and not punitive, so credit is given for completing it in its entirety.	0.23 %
<u>S</u> y	ATI Learning stem ssignment	4.55 %	90.00 % (18.00)	0-20	90.00 %	A	Please ensure that you complete the focused-reivew areas identified.	0.20 %
-	Cancer Orkshop	4.55 %	83.33 % (50.00)	060	83.33 %	В	Your peers provided the assigned grade based on their overall feedback.	0.19 %
							Please remember that when creating informational posters or flyers, that patient education material should not exceed the sixth-grade reading level. The organization of the material is also very important to ensure that reader is able to follow the logical pathway of the information. Signs and symptoms of the disorder are missing.	

Case	2:25-cv-0	00950-9	SDW-JSA
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/11/22, 1:03 PM			202	203_NRS_111_	001: Activit	y report (grade)	
í Grade item	Calculated weight	Grade	Range	Percentage	Letter grade	Feedback	Contribution to course total
© Caring For Patients with riematological Disorders:	4.55 %	190.00 % {80.00j	0-80	100.00 %	A	This assignment was not punitive, the quality or quantity of the assigned work you submit is designed to assist with your comprehension of the content area. You are credited for simply completing and submitting your assigned topic.	0 23 %
System: Hematology	4.55 %	35.73 % (86.70)	9-100	86.70 %	6 r	Well done Alandre! Please ensure that you review the focused review topic areas to solidify your understanding of the content.	6.20 X
CAICULATION TEST	o oo ∞.	(17 (10)	מר מ	ns na er	٠,	I had 95% OF 85 (see	i ingtrad moratachina
↓ FA DavisAdvantage;	4.55 %	100.00 % (20.00)	0–20	100.00 %	A	This assignment is designed to be instructive and not punitive, so credit is given for completing it in its entirety.	0.23 %
Assessment: Medical Surgical Respiratory	4.55 %	90.00 % (90.00)	0-100	90.00 %	A	Well done Alandre! Please review the areas outlined for the focused review so you have a greater understanding of the content.	0.20 %
্ফু FA <u>DavisAdvantage</u> Assignment:	4.55 %	0.00 % (0.00)	0100	0.00 %	F	You did not complete all the components of the assignment as of 5/2/22.	0.00 %
싫 FA DavisAdvantage:	4.55 %	100.00 % (20.00)	0-20	100.00 %	A	This assignment is designed to be instructive and not punitive, so credit is given for completing it in its entirety. I hope the clinical judgment assignment was sufficiently challenging!	0.23 %

https://moodle.essex.edu/course/user.php?mode=grade&id=57820&user=3503

22, 1:03 PM		202203_NRS_111_001: Activity report (grade)									
r Grade item	Calculated weight	Grade	Range	Percentage	Letter grade	Feedback	Contribution to course total				
<u>Practice</u> <u>Assessment:</u> <u>Medical-Surgical</u> Endo <u>crinė</u>	4.55 %	90.00 % (27 00)	0-30	90.00 %	A	Well done Alandre! Please complete the areas outlined in the focused review so that you can gain a greater understanding of the content and concepts covered.	0.20 %				
⊕ Diabetes Mellitus Case Study:	4.55 %	86.67 % (13.00)	0-15	86.67 %	8+	Good attempt, some of your answers were incomplete or misplaced. Please review the comments so that you have a better understanding of DM, pt. assessment and teaching.	0.20 %				
ASSESSMENT: RTN ASSESSMENT: RTN ASSESSMENT: ASSESSMENT: Caralovascular	4.55 %	96.70 % (29.01)	0-30	96.70 %	A	Well done Alandre! Please complete the areas outlined in the focused review so that you can gain a greater understanding of the content and concepts covered.	0.22 %				
© Grp Assignment: Coordinating care for Patients with Cardiovascular Disorders	0.00 %		-				0.00 %				
⇔ FA <u>DavisAdvantage</u> Assignment:	4.55 %	100.00 % (20.00)	0-20	100.00 %	A	This assignment is designed to be instructive and not punitive, so credit is given for completing it in its entirety. I hope the clinical judgment assignment was sufficiently challenging!	0.23 %				

8/11/22, 1	:03 PM							
(Grad	le item	Calculated weight	Grade	Range	Percentage	Letter grade	Feedback	Contribution to course total
	ATI Practice Assessment:	4.55 %	93.30 % (93.30)	0-100	93.30 %	A	Good job Alandre, Please review the areas outlined in the focused review to gain a better understanding of the concepts you did not do well in.	0.21 %
	். éA <u>DavisAdvantage</u> <u>Assignment:</u>	4.55 %	100,00 % {20.00}	0-20	i00.00 %	۸	Tris assignment is designed to be instructive and not punitive, so credit is given for completing it in its entirety. I hope the clinical judgment assignment was sufficiently challenging!	0.23 %
	ATI Practice Assessment	4.55 %	93.30 % (27.99)	0–30	93.30 %	A	Well done Alandre, Please ensure that you complete that locused a smoon sections.	0.21 %
	Signup Assignment: Caring for Patients with Gastrointestinal Disorders	0.00 %		-				0.00 %
	☼ FA DavisAdvantage:	4.55 %	100.00 % (20.00)	0–20	100.00 %	A	This assignment is designed to be instructive and not punitive, so credit is given for completing it in its entirety. I hope the clinical judgment assignment was sufficiently challenging!	0.23 %
	Gastrointestinal Disorders Discussion Forum whole forum	0.00 % (Empty)	-	0-60	-	-		0.00 %
	Case Study 78 and 79	0.00 %		-				0.00 %

'	8/11/22, 1:03 PM			202	203_NRS_111_0	001: Activit	y report (grade)	
	Grade item	Calculated weight	Grade	Range	Percentage	Letter grade	Feedback	Contribution to course total
	MENTAL HEALTH Cumulative Assignment Grade	4.55 %	100.00 % (100.00)	0-100	100.00 %	A		0.23 %
	$ ilde{\chi}$ Assignments total Weighted mean of grades.	5.00 %	86.52 % (86.52)	0-100	86.52 %	B+	Overridden:	
	্ধ্ৰ <u>Oncology and</u> <u>Hematology Case</u> Study	0.00 % (Empty)	-	0–100	-	-		0.00 %
	COVID SCREEN	ING QUESTIO	NNAIRE					
		0.00 %	100.00 % (10.00)	0–10	100.00 %	Α		0.00 %
	€ COVID SCREENING QUESTIONNAIRE	0.00 %	100.00 % (10.00)	0-10	100.00 %	Α		0.00 %
		0.00 %	100.00 % (10.00)	0-10	100.00 %	А		0.00 %
	(¿) COVID SCREENING QUESTIONNAIRE	0.00 % (Empty)	-	010	-	-		0.00 %
	COVID SCREENING QUESTIONNAIRE	0.00 % (Empty)	-	0–10	-	-		0.00 %
		0.00 % (Empty)		0–10	-	-		0.00 %
	<u>i∂ COVID</u> SCREENING QUESTIONNAIRE	0.00 % (Empty)	-	010	-	-		0.00 %
	M COVID SCREENING QUESTIONNAIRE	0.00 % (Empty)	-	0-10	-	-		0.00 %

https://moodle.essex.edu/course/user.php?mode=grade&id=57820&user=3503

i1/22, 1:03 PM			202	203_NRS_111_0	01: Activit	y report (grade)		
Grade item	Calculated weight	Grade	Range	Percentage	Letter grade	Feedback		ntribution course tal
	0.00 %	100.00 % (10.00)	0-10	100.00 %	Α		0.0	00 %
	0.00 % (Empty)	-	0–100		- .		-	
<u>Dosage</u> <u>Calculation Test</u> (<u>Retake</u>)	0.00 %	95.00 % (19.00)	0–20	95.00 %	А		0.	00 %
COMPREHENSI	VE FINAL EXAM	1						
NRS 111 SPRING 2022 COMPREHENSIVE SHALL SAM	100.00 %	72.17 % (83.00)	0–115	72.17 %	С		2:	5.26 %
Z COMPREHENSIVE FINAL EXAM total Weighted mean of grades.	35.00 %	72.17 % (72.17)	0–100	72.17 %	C ·		-	
Course total Weighted mean of grades.	-	72.81 % (72.81)	0–100	72.81 %	c		-	
You are logged in as Alandre 202203 [NRS] [11] 001	Gonel (Log out)							
Student Resources Mondie Guide Email Bookstore								
Tutoring Faculty Resources Adjunct Email Webservices								
Bookstore ECC Library English - United States (en_u English - United States (en								
English (en)	1_43)							

https://moodle.essex.edu/course/user.php?mode=grade&id=57820&user=3503

7/8

Data retention summary

EXHIBIT "M"

Email dated September 29, 2022, suggesting a math teacher be present at the next Grade Appeal meeting

3/13/23, 2:40 PM

Essex County College Students Email Mail - NRS 111 Grade Appeal Meeting with Chairperson



Alandre Gonel <agonel@email.essex.edu>

NRS 111 Grade Appeal Meeting with Chairperson

Alandre Gonel <agonel@email.essex.edu>

Thu, Sep 29, 2022 at 1:20 PM

To: "Gage, Gale" <gage@essex.edu>

Cc: "Chapman, Jennifer" <jchapman@essex.edu>, "White-Smith, Natalee" <nwhitesm@essex.edu>, "Soto, Christine Ann" <csoto7@essex.edu>, "Graham, Robbyn" <rgraham1@essex.edu>, cnk@stewartkarlin.com

Good afternoon Dr Gage.

This is Alandre Gonel

Dr. Gage I will be at the meeting on Monday, October 3rd at 12noon as scheduled.

Dr.Gage, during the meeting with professors Chapman, White-Smith and I, we spent a good amount of time going back and forth over a simple arithmetic calculation to the point professor Chapman had to put an end to the meeting.

Dr. Gage, I'm aware you have a busy schedule. To avoid further confusion and use the time effectively, may I suggest a math teacher be at the meeting?

Note: This is only a suggestion. [Quoted text hidden]

EXHIBIT "N"

March 24, 2023, Letter_ The College Wide Grade Appeal Decision



Exceed Expectations

Executive Dean of Faculty and Academics

Essex County College, Suite 5124
303 University Avenue

Newark, NJ 07102
Telephone 973-877-4447

March 24, 2023

Mr. Alexandre Gonel 541 Valley Street Orange, NJ 07050 Re: Grade Appeal NRS 111, Fall 2022

Dear Alexandre Gonel #900098721:

The College Wide Grade Appeal Committee convened on March 16, 2023 to discuss and investigate your grade appeal request. After carefully examining the documentation, listening attentively to your personal interview and meeting separately with your professors, Jennifer Chapman and Natalee White-Smith, the Committee voted unanimously to not change the grade of your Fall 2022 NRS 111 course. The grade stands as a "D."

Please note that the decision of the College Wide Grade Appeal Committee is final.

Sincerely,

Dr. Alvin Williams

Executive Dean of Faculty and Academics

xc: Dr. Keith Kirkland, Dean of Students

Dr. Gale Gage, Chair Division of Nursing and Health Sciences An Equal

EXHIBIT "O"

Letter dated October 24, 2022, from Dr. Gale Gage

DIVISION OF NURSING & ALLIED HEALTH

303 University Avenue, Newark, NJ 07102 p: (973) 877-1865 f: (973) 877-3117

p: (973) 877-1868

October 24, 2022

Mr. Alandre Gonel 541 Valley Street Orange, New Jersey 07050

Dear Mr Gonel:

The Divisional Grade Appeal Committee met and recommended that you be given an opportunity to amend the grade pending a timely summative assessment of the medical-surgical and mental health content by you, the student. If this recommendation is satisfactory to you, please let me know your decision in writing by November 4, 2022 so that appropriate action can be taken to implement the recommendation. Thank you.

Respectfully,

Gale S. Gage

Gale S. Gage PhD, RN, CNE

Chairperson of Nursing & Health Sciences Division

Essex County College

gage @essex.edu

973-877-3485.

EXHIBIT "P"

Email dated July 9, 2022



NRS 111 Course Performance Final Update

From Natalee White-Smith<nwhitesm@webmail.essex.edu>

Date Sat 2022-07-09 9:54 PM

To Alandre Gonel <agonel@email.essex.edu>

Cc: Chapman, Jennifer <jchapman@essex.edu>; Archer, Colin <carcher1@essex.edu>; Gage, Gale <gage@essex.edu>;Graham, Robbyn <rgraham1@essex.edu>;Johnson,

Jazlyn <jjohns45@essex.edu

Hello Mr. Gonel,

I hope this email finds you well. I just wanted to inform you that based on your final course score of 72.81%, you have failed to meet the NRS 111 course completion requirements to proceed to NRS 206 in the Fall of 2022. As a result, you will have to request a meeting with the Program Chairperson to determine eligibility for one-time-only readmission to the generic RN program track. Please review pages 31 and 32 of your RN Student Handbook 2021-2022 (Revised) for further instructions on how to proceed. As usual, feel free to reach out to me if you have any questions or concerns.

Thank you,

--

Natalee Smith, MSN, RN, CEN Nursing Adjunct Instructor Division of Nursing and Health Sciences Essex County College 303 University Avenue Newark, NJ 07102 email:nwhitesm@webmail.essex.edu The NRS 111 Spring 2022 Comprehensive Final Exam took place on July 7, 2022. (See Exhibit "C"_ ATI Comprehensive Final Exam Result for details). On July 9, 2022, the result of the comprehensive final exam was communicated to my client. (See email dated July 9, 2022, attached hereto as Exhibit "S"). After informing my client that based on his final course score of 72.81, he has failed NRS 111 course, **to further ridicule my client**, Professor Chapman (Lecturer in Mental Health) asked him to submit a 32-page assignment by July 12, 2022; if not submitted by the due date, the assignment will not be graded.

Without questioning Professor Chapman's motives in asking the Plaintiff to submit this assignment, three days after informing him that he had failed the course, and asked him to meet with the Program Chairperson to determine eligibility for one-time-only readmission to the generic RN program, the Plaintiff **pushed himself**, amid his frustration and discontent to complete and submit the assignment by the requested date. (See homework required to submit by July 12, 2022, as Exhibit "S") Despite submitting the assignment on the due date, the Plaintiff received a grade of zero for the assignment. When the Plaintiff asked Professor Chapman why he received a zero for an assignment, Professor Chapman responded that there was no grade associated with the assignment.

Without questioning Professor Chapman's motives in asking the Plaintiff to submit this assignment, three days after informing him that he had failed the course, and to reapply to the nursing program the following year, the Plaintiff **pushed himself**, amid his frustration and discontent to complete and submit the assignment by the requested date. (See homework required to submit by July 12, 2022, as Exhibit "S") Despite submitting the assignment on the due date, the Plaintiff received a grade of zero for the assignment. When the Plaintiff asked Professor Chapman why he received a zero for an assignment, Professor Chapman responded that there was no grade associated with the assignment.

EXHIBIT "Q"

Homework required to submit by July 12, 2022.

Nursing Care Plan

Essex County College

NRS 111

Mental Health

Professor Chapman

July 12, 2022

Mental Status Examination

G.R a 21-year-old female admitted to Clara Maass's 1 South unit for schizoaffective disorder and substance abuse. Patient interviewed in her room while sitting at the end of her bed. She dresses according to the weather and practices good hygiene. The patient appeared calm and cooperative while maintaining good eye contact all throughout the interview. Patient uses a clear, normal tone of voice. Her thought process is goal directed and coherent to the topics discussed. Patient denies auditory or visual hallucinations and denies suicidal or homicidal ideations. She displays a positive and appropriate attitude to her current situation and future goals. Her bright affect was appropriate to context as she expressed positive thoughts about her future. Her memory is intact as evidenced by recalling past experiences that lead to hospitalization. Overall, she has good judgment pertaining to future life choices.

CLIENT INITIALS	: <u>G.R</u> STUDE	NT NAMES: Alandre Gone
Date: June 21, 2022	Grad	e:
<u>Database</u>		
Name: G.R	Room #: 112	Date of Admission: 5/22/2022
Age: 21	Date of Birth: 02/11/2001	Place of Birth: Paterson, NJ
Sex: F	Marital Status: Single	Religion: Not specified
Occupation: unknown		Education: some high school
Members of Household	Relation to Patient	Age
 name not specified 3. 4. 	mother	unknown
Type of Dwelling/Housing	g:	
Admitting Diagnosis (es)		Date of Onset:
	zoaffective Disorder tance abuse	
Current Surgical Interven	ntion/s: none	
Surgical History: N/A		
Medical History: N/A		

CLIENT INITIALS: <u>G.R</u> STUDENT NAMES: Alandre Gonel

Psychosocial History: G.R is a 21-year-old female born on February 11, 2001. She was homeless for one year after leaving her parents' home in Paterson, NJ for unknown reasons. G.R is an only child. At the age 19 she began using recreational drugs such as heroin and cocaine. She is currently unemployed and has dropped out of high school. G.R shares her favorite hobby is debating and her future goal is to attend college to become a lawyer.

Client's knowledge/perception of illness: Patient is aware and expresses understanding of current situation and the extent of her condition. She has some insight of her situation as she admits to drug use as a major problem but denies mental illness. She shows interest in continuing her recovery at a rehab facility where she will stay for three months.

Reason for entry into healthcare system: Patient has a history of hospitalization. Patient was found unconscious and brought to the ED. According to her mother, G.R showed up at her house after two months of being reported missing attempting to hurt her. She appeared confused and agitated. Patient had an unexplained laceration to her forehead.

Explain how socio-cultural factors affect response to illness?

Women and adolescents are more prevalent to substance use disorders as seen with G.R. Factors such as the environment and interpersonal relationships contribute to this disorder. Possible personal stressors may have influenced her decision to use recreational drugs. Patient mentions she would like to find a group of people who will have a positive influence in her life. She shares leaving her home and ending up on the streets for a year. This suggests the possibility of an unhealthy relationship with her parents.

T NAMES: Alandre Gone
•

How are lifestyle and daily activities affected by this illness? - Patient noted to have sleep disturbances, which may hinder activities of daily living.

How is learning capacity affected at this time? -

Patient's learning capacity is not affected at this moment. She is alert and oriented to time, place, and person. Patient understands the need for treatment when she says, "I want to be cleaned, I'm going to rehab for three months." Patient is motivated to recover and sustain a normal lifestyle after rehab.

What developmental level is the individual at according to Erikson?

According to Erikson the patient is categorized under Intimacy vs. isolation.

a. What is the client's actual level of development according to assessment?

Identity vs. Role Confusion

b. List behaviors that demonstrate the client has or has not achieved appropriate **developmental level:** The patient has not achieved a sense of identity. She has been homeless for a year and has not established a sense of identity in occupation, sex roles, politics, and religion.

Allergies (Food/Drugs): no known allergies

Diet taken at Home:

Breakfast scrambled eggs, white toast, cereal

Lunch: cold cut sandwiches, hot dogs

Dinner: chicken, smash potatoes, vegetables

Prosthetic Devices: N/A

Medical Diagnosis Evaluation

CLIENT INITIALS: <u>G.R</u> STUDENT NAMES: Alandre Gonel

Diagnosis: Schizoaffective Disorder

Pathophysiology: The exact pathophysiology of schizoaffective disorder is currently unknown. Some studies have shown that abnormalities in dopamine, norepinephrine, and serotonin may play a role.[1] Also, white matter abnormalities in multiple areas of the brain, particularly the right lentiform nucleus, left temporal gyrus, and right precuneus, are associated with schizophrenia and schizoaffective disorder.[2] Researchers have also found reduced hippocampal volumes and distinct deformations in the medial and lateral thalamic regions in those with schizoaffective disorder in comparison to controls.

Etiology: The term schizoaffective disorder first appeared as a subtype of schizophrenia in the first edition of the DSM. It eventually became its own diagnosis despite a lack of evidence for unique differences in etiology or pathophysiology. Therefore, there have been no conclusive studies on the etiology of the disorder. However, investigating the potential causes of mood disorders and schizophrenia as individual disorders allows for further discussion. Some studies show that as high as 50% of people with schizophrenia also have comorbid depression.[3] The pathogenesis of both mood disorders and schizophrenia is multifactorial and covers a range of risk factors, including genetics, social factors, trauma, and stress.[4] Among people with schizophrenia, there is a possible increased risk for first-degree relatives for schizoaffective disorder and vice-versa; there may be increased risk among individuals for schizoaffective disorder who have a first-degree relative with bipolar disorder schizophrenia, or schizoaffective disorder.[5]

CLIENT INITIALS:	G.R	_ STUDENT NAMES:	Alandre Gonel

Clinical Signs: Hallucinations (Auditory, hearing voices), Delusions (Ideas of reference, Somatic, grandeur), Negative symptoms (Anergia, avolition),

Nursing Care: Monitor patient for any signs of manic episode. Check in on patients wellbeing often. Maintain patients' safety. Provide low stimulation environment. Help patient develop strategy to manage illness. Medication education/regimen.

Diagnosis: Substance abuse

Pathophysiology: The pathophysiology of addiction revolves around the concepts of synaptic plasticity, specifically LTP (long-term potentiation) and LTD (long-term depression). Long-term potentiation is the phenomenon of strengthened neural connections over time and with increased stimuli. Long-term depression is the decrease in the responsiveness of a neural signal with stimulation. These are the same processes involved in learning and habit formation. The biochemical proof of these processes' involvement in drug addiction is founded in the same molecules undergoing upregulation in both cases - extracellular signal-regulated protein kinase (ERK), cyclic AMP response element-binding (CREB), ELK-1, and Fos.

Etiology: The exact cause of substance use disorder is not known. A person's genes, the action of the drug, peer pressure, emotional distress, anxiety, depression, and environmental stress can all be factors.

ESSEX COUNTY COLLEGE NURSING DEPARTMENT NURSING ASSESSMENT & PLAN OF CARE

CLIENT INITIALS: _	G.R	STUDE	NT NAMES:	Alandre Gonel
Clinical Signs: Multiple facto are abusing. Another factor is symptoms often include anx (tachycardia, tachypnea, high	how long the jiety, potential	patient has bee psychosis, a	en a substance	abuser. Substance abuse
Nursing Care: Management	pegins with dec	creasing anxie	ty, stabilizing	vitals, and preparing
rapid response teams for deter	iorating patien	ts. Maintain st	able airway, b	reathing. Monitor level
of consciousness.				
CURRENT PHYSICIANS O	RDERS APPL	ICABLE TO	PATIENT	
Activity: N/A				
DIET: High calorie finger foo	ods.			
TREATMENTS:				
I.V. Therapy: Type: <u>N/A</u>	Solution	N/A	Rate]	<u>N/A</u>

CLIENT II	NITIALS: <u>G.R</u>	_ STUDENT NAMES:	Alandre Gonel
Medication 1	clonazePAM (Clonapam)		
Category Class	Benzodiazepines		

Expected Pharmacological Action

Although unknown, drug is thought to prevent panic and seizures by potentiating the effect gamma-aminobutyric acid (GABA), which is an inhibitory neurotransmitter.

Therapeutic Use

Clonazepam is used to prevent and control seizures. This medication is known as an anticonvulsant or antiepileptic drug. It is also used to treat panic attacks.

Complications

Warn patient not to consume alcohol or take opioid during clonazepam therapy without prescriber knowledge, as severe respiratory depression can occur and may led to death.

Contraindications/Precautions

hypersensitivity to clonazepam, other benzodiazepines, or their components.

Interactions

Alcohol use: Increase CNS depression, including severe respiratory depression and significant sedation and somnolence.

Medication Administration

Adults and children over age 10 or weighing more than 30 kg. 1.5 mg daily in divided doses t.i.d. Increased by 0.5 to 1 mg every 3 days, if needed, until seizure are controlled. Maximum: 20 mg daily.

Nursing Interventions

Use clonazepam cautiously in patients with mixed seizure disorder (because this drug can increase the risk of generalized tonic-clonic seizure), renal failure or troublesome secretions(because clonazepam increases secretion salivation) and in elderly patients (because they are more sensitive to drug's CNS effects)

CLIENT INITIALS: <u>G.R</u> STUDENT NAMES: Alandre Gonel

Client Education

Tell patient to take drug exactly as prescribe. Explain that stopping abruptly can cause seizure and withdrawal symptom Urge patient to carry medical identification of his/her seizure disorder and drug therapy

Evaluation of Medication effectiveness

In patients with seizures, document the number, duration, and severity of seizures to help determine drug efficacy. Monitor motor function and report an excessive decrease in muscle tone (hypotonia) or problems with coordination (ataxia).

CLIENT INITIALS:	G.R	_STUDENT NAMES:	Alandre Gonel
Medication 2	Alprazolam (Zanax))	
Category Class	Benzodiazepines		

Expected Pharmacological Action

May increase effects of gamma-aminobutyric acid (GABA) and other inhibitory neurotransmitters by binding to specific benzodiazepine receptors in the cortical and limbic areas of the CNS. GABA inhibits excitatory stimulation, which helps control emotional behavior

Therapeutic Use

To control anxiety disorder, relieve anxiety (short-term therapy), or to treat anxiety associated with depression.

Complications

Agitation, akathisia, confusion, depression, dizziness, drowsiness, fatigue, hallucinations, headache, insomnia, irritability, lack of coordination, light-headedness, memory loss, nervousness, paresthesia, rigidity, sedation, speech problem, syncope, tremor, weakness.

Contraindications/Precautions

Acute angle-closure glaucoma; hypersensitivity to alprazolam, its components, or other benzodiazepines; itraconazole or ketoconazole therapy.

Interactions

Alcohol use: Enhanced adverse CNS effects of alprazolam; increase risk of significant sedation and somnolence, especially if combined with an opioid. Possibly increase serum phenytoin level, causing phenytoin toxicity.

Medication Administration

Use dry gloved hands to remove orally disintegrating tablets from the bottle just prior to administration. Do not break, crush, or split extended-release tablets. Administer extendedrelease tablet in the morning.

CLIENT INITIALS: <u>G.R</u> STUDENT NAMES: Alandre Gonel

Nursing Interventions

Be aware that opioid therapy should only be used concomitantly with alprazolam in patients for whom other treatment option are inadequate. Monitor patient closely for sig n and symptoms of decrease in consciousness, including, coma, profound sedation, and significant respiratory depression.

Client Education

Warn the patient not to stop talking abruptly. Explain that gradual tapering helps to avoid withdrawal symptoms. Warn patients not to consume alcohol or take an opioid during alprazolam treatment without prescriber knowledge, as severe respiratory depression can occur and may lead to death.

Evaluation of Medication effectiveness

Relief of mild to moderate discomfort.

Increased ease of joint movement.

May take 2–3 wk for maximum effectiveness.

Reduction of fever.

Prevention of transient ischemic attacks. Prevention of MI.

CLIENT II	NITIALS:	G.R	STUDENT NAMES:	Alandre Gonel
Medication 3	escitalopra	m (Lexapro)		
Category Class	Selective se	erotonin reupta	ake inhibitors (SSRI).	

Expected Pharmacological Action

Inhibits reuptake of the neurotransmitter serotonin by CNS, thereby increases the amount of serotonin available in nerve synapses. An elevated serotonin level may result in elevated mood and reduced anxiety or depression.

Therapeutic Use

To treat acute generalized anxiety disorder - To provide treatment and maintenance for major depression.

Complications

dizziness, dyskinesia, dystonia, extrapyramidal effects, fatigue, headache, hypothermia, insomnia, lethargy, mania, myoclonus, neuroleptic malignant syndrome, paresthesia, seizure, serotonin syndrome, somnolence, suicidal ideation.

Contraindications/Precautions

Concurrent therapy with pimozide; hypersensitivity to escitalopram, citalopram or its components; use within 14 days of MAO inhibitor therapy, including intravenous methylene blue or linezolid.

Interactions

alcohol use: Possibly increase cognitive and motor effects of alcohol.

Medication Administration

Administer drug in the morning or evening.

CLIENT INITIALS: <u>G.R</u> STUDENT NAMES: Alandre Gonel

Nursing Interventions

Use escitalopram cautiously in patients with a history of seizures or mania, patients with severe renal impairment, and those with diseases or conditions that produce altered metabolism or hemodynamic responses. Be aware that patients should be assessed for bipolar disorder before escitalopram therapy begins, because its use in treating depression may precipitate a mixed/manic episode.

Client Education

Inform patient that alcohol use isn't recommended during escitalopram because it may decrease his ability to think clearly and perform motor skills. Advise patient to avoid hazardous activity until drug's CNS effects are known. Warn patient not to stop taking abruptly. Explain that gradual tapering helps to avoid withdrawal symptoms.

Evaluation of Medication effectiveness

- Maintaining normal sleep pattern
- Verbalizing feeling less anxious, more relaxed
- Greater ability to participate in social and occupation interactions

CLIENT INITI	ALS: G.R	STUDENT NAMES:	Alandre Gonel
Medication 4	fluoxetine (Prozac)		
Category Class	Selective serotonin re	euptake inhibitors (SSRI).	

Expected Pharmacological Action

Selectively inhibits reuptake of the neurotransmitter serotonin by CNS neurons and increases the amount of serotonin available in nerve synapses. An elevated serotonin level may result in elevated mood and, consequently, reduce depression.

Therapeutic Use

Depression - To provide maintenance therapy for depression.

Complications

Akathisia, anxiety, ataxia, balance disorder, chills, depersonalization, dream disturbances, drowsiness, emotional lability, euphoria, fatigue, fever, headache, hypertonia, hypomania, insomnia, mania, myoclonus, nervousness, neuroleptic malignant syndrome, paranoid reaction, restlessness, seizure, serotonin syndrome, somnolence, suicidal ideation, tremor, vertigo, weakness yawning.

Contraindications/Precautions

Concurrent therapy with pimozide or thioridazine, hypersensitivity to fluoxetine, other selective serotonin reuptake inhibitors or their components; use within 14 days of MAO inhibitor therapy, including linezolid or intravenous methylene blue.

Interactions

Possibly prolonged half-life of alprazolam, diazepam if taken with this drug. Increased anticoagulant activity and risk for bleeding when taking with aspirin, warfarin, NSAID

CLIENT INITIALS: <u>G.R</u> STUDENT NAMES: Alandre Gonel

Medication Administration

Give Prozac prescribed once daily in morning and twice-daily doses in morning and at noon, except for acute depressive episodes associated with bipolar I disorder. In this indication, Prozac once-daily dose should be given in the evening. Use a calibrated device when measuring dose using Prozac oral solution.

Nursing Interventions

Use fluoxetine cautiously in patients with a history of seizures and in children because of potential adverse effects. Use fluoxetine cautiously in patients with congenital long QT syndrome, previous history of QT prolongation or family history of long QT syndrome or sudden cardiac death.

Client Education

Caution patient to avoid alcohol and OCT drugs for 10 to 24 hrs after receiving the drug. Advise patient to avoid hazardous activities for 18 to 24 hrs after discharge. Inform patient and family that agitation, fear, panic attack, emotional lability (if patient has a history of them) may occur

Evaluation of Medication effectiveness

- Increased sense of well being
- Renewed interest in surroundings
- Decreased incidence of panic attacks
- Decreased mood alterations

CLIENT INITI	ALS: <u>G.R</u>	_ STUDENT NAMES:	Alandre Gonel
Medication 5	LORazepam (Activan)		
Category Class	Benzodiazepines		

Expected Pharmacological Action

May potentiate the effects of gamma aminobutyric acid (GABA) and other inhibitory neurotransmitter by binding to specific benzodiazepine receptors in cortical and limbic areas of the CNS

Therapeutic Use

Lorazepam is used to relieve anxiety.

Complications

Lorazepam may increase the risk of serious or life-threatening breathing problems, sedation, or coma if used along with certain medications, such as codeine, hydrocodone, methadone, meperidine, oxycodone for pain.

Contraindications/Precautions

For all form of lorazepam: acute angle closure glaucoma; hypersensitivity to lorazepam, other benzodiazepines or their components; for parenteral form: intra-arterial delivery, severe respiratory insufficiency, sleep apnea syndrome.

Interactions

Alcohol use: Increase CNS depression and severe respiratory depression.

Taking lorazepam with drug such as clozapine may increase the risk of ataxia, delirium, excessive salivation, hypotension, marked sedation and respiratory arrest.

Medication Administration

Adults. Initial 2 to 3 mg twice a daily, increased as needed.

Maximum: 10 mg daily.

CLIENT INITIALS: <u>G.R</u> STUDENT NAMES: Alandre Gonel

Nursing Interventions

Before starting lorazepam therapy in a patient with depression, make sure he/she already takes an antidepressant, because of the increased risk of suicide in patients with untreated depression.

Client Education

Instruct patient to take lorazepam exactly as prescribed and not to stop without consulting prescriber because of the risk of withdrawal syndrome.

Urge patient to avoid alcohol while taking lorazepam because it increases drug's CNS depressant effects and can cause severe reparatory depression

Evaluation of Medication effectiveness

Patient maintaining regular sleep pattern.

Patient verbalizing feeling less anxious and more relaxed.

Patient mood improved.

Greater ability to cope with manifestations in social and occupational interactions.

CLIENT INITIALS: G.R STUDENT NAMES: Alandre Gonel					
Medication 6	halope	eridol			
Category Class	Conve	entional anti	psychotics		

Expected Pharmacological Action

May block postsynaptic dopamine receptors in the limbic system and increase brain turnover of dopamine, producing and antipsychotic effect.

Therapeutic Use

Haloperidol is used to treat psychosis and schizophrenia. It also used to control motor tics (uncontrollable need to repeat certain body movements) and verbal tics (uncontrollable need to repeat sounds or words) in adults and children who have Tourette's disorder.

Complications

Be aware that if patient develops hypotension while receiving haloperidol therapy, and a vasopressor is required, epinephrine must be used, because haloperidol may block its vasopressor activity and paradoxically cause hypotension to worsen

Contraindications/Precautions

Dementia with Lewy bodies, hypersensitivity to haloperidol or its components, Parkinson's disease, severe toxic CNS comatose states or depression.

Interactions

Alcohol use: Increase CNS depression and risk of hypotension and respiratory depression.

CNS depressants such as anesthetics and opiates: Increased CNS depression and risk of respiratory depression and hypotension.

Medication Administration

Adult and adolescents. Initial: 0.5 to 2 mg every 8 to 12 hr, increased to 3 to 5 mg every 8 to 12 hr, as needed.

CLIENT INITIALS: <u>G.R</u> STUDENT NAMES: Alandre Gonel

Nursing Interventions

Use haloperidol cautiously in patients with a history of prolonged QT interval, patients with uncorrected electrolyte disturbances, and patients receiving class IA or III antiarrhythmics because of an increased risk of prolonged QT int

Client Education

Urge patient not to drink alcohol during haloperidol therapy.

Caution patient to avoid driving and other hazardous activities if sedation occurs. Also warn patient to take measure to avoid falls because of adverse effects

Evaluation of Medication effectiveness

- -Patient's hallucinations, insomnia, agitation, hostility and delusions are decreased
- decreased tics and vocalization in Tourette's syndrome
- improved behavior in children with severe behavior problems

CLIENT IN	NITIALS: <u>G.R</u>	_STUDENT NAMES:	Alandre Gonel
Medication 7	traZODone (Desyrel)		
Category Class	Antidepressant		

Expected Pharmacological Action Block serotonin reuptake along the presynaptic neuronal membrane, causing an antidepressant effect.

Therapeutic Use

This medication is used to treat major depression.

Complications

Be aware that trazodone therapy may increase the risk of priapism.

Contraindications/Precautions

Hypersensitivity to trazodone or its components, use within 14 days of an MAO inhibitor including intravenous methylene blue and linezolid.

Interactions

Alcohol use: increased CNS depression, risk for hypotension and respiratory depression.

Medication Administration

Adult. 150 mg in divided doses daily, increased 50 mg/day every 3 to 4 days.

Maximum: 400 mg daily in divided doses.

Nursing Interventions

Use trazodone cautiously in patients with cardiac disease, because this drug can cause arrhythmias.

Closely monitor depressed patients for suicidal thoughts and tendencies.

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ESSEX COUNTY COLLEGE NURSING DEPARTMENT NURSING ASSESSMENT & PLAN OF CARE

CLIENT INITIALS: <u>G.R</u> STUDENT NAMES: Alandre Gonel

Client Education

Instruct patient not to stop trazodone abruptly. Urge family and caregivers to watch patient closely for abnormal thinking or behavior or increased aggression or hostility.

Evaluation of Medication effectiveness

Improvement in depressive symptoms such as depressed mood, suicidal thoughts or intent.

CLIENT INITIALS: G.R STUDENT NAMES: Alandre Gonel					
Medication 8	sertraline (Zoloft)				
Category Class	Selective Serotonin	reuptake inhibitors			

Expected Pharmacological Action

Inhibits reuptake of the neurotransmitter serotonin by CNS neurons, thereby increasing the amount of serotonin available in nerve synapses. An elevated serotonin level may result in elevated mood and reduced depression.

Therapeutic Use

To treat major depression disorder

Complications

May cause: Abnormal dreams, aggressiveness, agitation, amnesia, anxiety, apathy, ataxia cerebrovascular spam, coma, confusion, delusions, depression, dizziness, drowsiness, emotional lability, euphoria, extrapyramidal symptom, fatigue, fever, hallucination, seizures, paranoid reaction, suicidal ideation, syncope, tremor, yawning.

Contraindications/Precautions

Concurrent use of disulfiram (oral solution) or pimozide; hypersensitivity to sertraline or its components; use within 14 days of an MAO inhibitor, including intravenous methylene blue and linezolid.

Interactions

Increased risk of QT-interval prolongation and/or ventricular arrhythmias when sertraline interacts with antibiotics such as erythromycin, gatifloxacin, moxifloxacin, sparfloxacin.

sertraline interact with aspirin, clopidogrel, heparin, NSAIDs, warfarin may increased anticoagulant activity and risk for bleeding

CLIENT INITIALS: <u>G.R</u> STUDENT NAMES: Alandre Gonel

Medication Administration

Use the supplied calibrated dropper to measure oral solution dose.

Mix oral solution with 4 ounce of ginger ale, lemon/lime soda, lemonade, orange juice or water. do not mix with any other solution.

Administer oral solution immediately after mixing.

Nursing Interventions

Be aware that sertraline should not be given to with bradycardia, congenital long QT syndrome, hypokalemia or hypomagnesemia, recent acute myocardial infarction, or uncompensated heart failure because of increased risk of prolonged QT interval and torsade the pointes.

Monitor liver enzymes and BUN and serum creatinine levels, as appropriate, in patient with hepatic or renal dysfunction.

Client Education

Warn patient to seek immediate emergency care if severe or persistent signs and symptoms of an allergic reaction occur.

Tell patient that sertraline increases the risk of serotonin syndrome and reactions that resemble neuroleptic malignant syndrome, rare but serious complications, when taken with some other drugs.

Evaluation of Medication effectiveness

Increased sense of well-being.

Renewed interest in surroundings.

Decrease in obsessive-compulsive behaviors.

Decrease in frequency and severity of panic attacks.

Decrease in symptoms of PTSD. Decrease in social anxiety disorder.

ESSEX COUNTY COLLEGE NURSING DEPARTMENT NURSING ASSESSMENT & PLAN OF CARE

CLIENT INITIALS:	G.R	STUDENT NAMES:	Alandre Gonel
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Diagnostic Tests:

Test Name	Reason for Order	Pre Care	Post Care	Results
UDT	Determine any drugs that the patient has taken recently.	N/A	N/A	Positive for marijuana, heroin and cocaine.

CLIENT	Γ INITIALS:	G.R	STUDENT NAM	MES: Aland	re Gonel
Laboratory Data (Abnormal only)Name of Test	Normal Value	Client's Value	Clinical Significance of client value	Client Nursing Care	Client Teaching Needs
Hemoglobin	14-18 (MEN)	11.4	LOW -Risk for anemia, fatigue	*Monitor hemoglobin level *Assess client's ability perform self-care and ADL's *Provide assistance as needed *Provide scheduled resting time *Provide oxygen PRN *Refer to an occupational therapist	*Assist client with creating a schedule that allows for rest periods. *Teach client about taking medications such as erythropoietin which increases hemoglobin and decreases the need for transfusions
MPV	8-12	13.1	HIGH -Platelets are larger than average (may also be producing too many platelets; larger platelets are more reactive) -Increases risk of suffering from a heart disease	*Refer client to a dietician *Check Vitamin D levels *Exercise as tolerated to lose weight	*Teach about the importance of ceasing smoking/not smoking *Consult with a dietician about change of foods *Develop a weight loss plan with client

CLIEN	Γ INITIALS:	G.R	STUDENT NAM	MES: Aland	re Gonel
ALKALINE PHOSPHATASE	44-147 IU/L	252	HIGH -can be an indicator of damage to the liver or some type of bone disorder	*Determine if medications can be the cause of the increased lab	*Eliminate foods high in zinc such as lamb and spinach *Eat foods high in copper and other
AST	8-33 U/L	255	HIGH	*Teach client about lifestyles changes which	foods that will help regulate the body enzyme levels
ALT	7-55 U/L (MALE)	286	HIGH		*Increase your time in the sun to help raise vitamin D levels or take vitamin D supplements *Exercise
					*Teach client about lifestyle changes that may lower ALT such as exercise, increase in fiber intake, reducing fats, etc.

CLIENT INITIALS:	G.R	_ STUDENT NAMES:	Alandre Gonel

Nurse Plan:

Nursing Diagnosis (actual 1)	Impaired Verbal Communication related to altered perceptions as evidenced by cognitive disturbances such as thought blocks, hallucinations/ delusions.			
Short-Term Goals	Patient will demonstrate the ability to remain on one topic, using occasional and appropriate eye contact for five minutes with the therapist or nurse.			
Long-Term Goals	Patient will demonstrate an ability to carry verbal communication in an acceptable manner by the time of discharge from treatment.			
Interventions	Rationales	Evaluation		
Throughout the day, schedule short, frequent interactions with a customer.	Short periods of time are less stressful, and regular appointments allow a client to build a sense of familiarity and security. (nursestudy.net)	Patient is socializing in the break room and watching TV with other members of the facility.		
When interacting with the patient, speak slowly; keep the voice low, and use clear, and simple sentences.	In a patient with schizophrenia, a loud or high-pitched voice might cause anxiety, agitation, or disorientation. It is possible to assist the patient to comprehend what is being stated by using basic language and speaking clearly. (nursestudy.net)	Patient is able to comprehend and communicate in a clear manner.		
If there is trouble understanding a patient, gently let him or her know.	Pretending to comprehend reduces the nurse's credibility and trustworthiness in the eyes of the patient (nursestudy.net)	Building trust with the patient helps build rapport.		

|--|

Nursing Diagnosis (actual 2)	Ineffective Coping related to poor support networks and inappropriate behavior model secondary to substance abuse as evidenced by compromised problem-solving abilities and adaptive behavior.			
Short-Term Goals	The patient will learn to verbally express his acknowledgment about the need for counseling and his understanding that determination alone cannot govern abstinence.			
Long-Term Goals	The patient will be encouraged to express understanding of the relationship between substance misuse and the present situation and will be able to participate in a therapeutic program.			
Interventions	Rationales Evaluation			
Determine the comprehension of the current circumstance, previous situations, and other strategies for dealing with life's problems.	This measure can determine the comprehension of the current circumstance, previous situations, and other strategies for dealing with life's problems. (nursestudy.net)	Patient demonstrate better coping mechanism to deal with life' problem		
Encourage the patient to express their emotions, fears, and worry.	This strategy may assist the patient in coming to terms with long-unresolved concerns. (nursestudy.net)	Patient is able to express her emotions, fears, and worry.		
Implement appropriate steps under standard hospital policy.	This technique will aid in the prevention of suicide attempts. (nursestudy.net)	Patient states having less suicide thought		

CLIENT INITIALS: <u>G.R</u> STUDENT NAMES: Alandre Gonel

Nursing Diagnosis (risk 1)	Risk for suicide or suicidal thou	ghts	
Short-Term Goals	Patient will identify and verbalize that false thoughts or ideas occur at times of increased anxiety by the end of 2 weeks		
Long-Term Goals	Patient will have no occurrence of delusional thoughts by the time of discharge from treatment		
Interventions	Rationales	Evaluation	
Render close patient supervision by sustaining observation or awareness of the patient at all times.	Suicide may be an impulsive act with little or no warning. Close supervision is a must. (nurseslabs.com)	Close supervision helps prevent suicide and gives patient the support they need.	
Provide a safe environment. Weapo ns and pills should be removed by friends, relatives, or the nurse.	Removing potentially harmful objects prevents the patient from acting or sudden self-destructive impulses. (nurseslabs.com)	Safe environment reduces the risk of suicide attempt.	
Present opportunities for the patient to express thoughts, and feelings in a nonjudgmental environment.	It is helpful for the patient to talk about suicidal thoughts and intentions to harm themselves. Expressing their thoughts and feelings may lessen their intensity. Also, they need to see that staffs are open to discussion. (nurseslabs.com)	Patient is able to express their feelings and not think about killing themselves.	

CLIENT INITIALS	S: <u>G.R</u> STUDEN	NT NAMES: Alandre Gonel			
Nursing Diagnosis (risk 2)	Risk for injury related to substan	Risk for injury related to substance intoxication			
Short-Term Goals	Within 8 hours of nursing intervention and treatment, the patient will determine the factors that increases their risk for injury and will demonstrate behaviors to avoid injury.				
Long-Term Goals	In one month, the patient will re	emain free of injuries.			
Interventions	Rationales	Evaluation			
Enhance safety through the use of medical alarm systems. Recognize and watch out for alarm fatigue. Avoid the use of physical and chemical restraints. Obtain a health care provider's order if restraints are needed.	Medical alert systems are triggered to alert an emergency that a patient is experiencing physiological changes necessitating immediate treatment. (nurseslabs.com) Restraints can cause injuries such as strangulation, asphyxiation, trauma, or head injury. If restraint is needed, ethical principles of proportionality and purposefulness should be applied (nurseslabs.com)	Medical alert systems and alarms notify medical personnel and people around the resident if he or she is unsafe. Having the resident free of restraint as much as possible will prevent free of injuries.			
Ask family or significant others to be with the patient to prevent the incidence of accidental falling or pulling out tubes.	This is to prevent the patient from accidental injury, falling, or pulling out tubes. (nurseslabs.com)	Having a family or significant will protect the patient from accidental falls.			

CLIENT INITIALS:	G.R	STUDENT NAMES:	Alandre Gonel

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EXHIBIT "R"

Letter dated March 14, 2024, sent to Christine A. Soto, General Counsel for Essex County College

STEWART LEE KARLIN LAW GROUP, P.C.

DANIEL DUGAN, ESQ.

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MEMBER OF THE BAR
NEW JERSEY & NEW YORK

Concentrating in Employment, Insurance and Education Law and Commercial Litigation

March 14, 2024

Via Federal Express

Christine A. Soto, General Counsel Essex County College 303 University Ave. Newark, NJ 07102

Re: Mr. Alandre Gonel

Regarding the NRS111 Grade Appeal.

Dear Ms. Soto:

As you may recall, we were retained to represent Mr. Gonel, in connection with his appeal of the NRS111 grade in the LPN to RN bridge program.

As you may aware, after holding my client in the dark for months, instead of taking into account his complaints, and recalculating the clear mathematical error made in calculating his final grade, on or about March 24, 2023, in a one-paragraph letter simply stated that after a careful examination, the committee had voted unanimously not to change his grade with no rationale in the letter explaining why. As a result, the school expelled him from the entire nursing program.

Nevertheless, there are several points that Mr. Gonel would like to address and would appreciate a response from the following members of the school:

Professor Colin Archer

Dr. Alvin Williams

Dr. Gennevieve Danville

Dr. Eunice Kamunge

Christine A. Soto, General Counsel Essex County College March 14, 2024 -Page 3-

Dr. Keith Kirkland Mr. Mohamed Seddiki

On Wednesday, March 23, 2022, at approximately 8:35-9:00 p.m., two days after a verbal argument between my client and Dr. Gale Gage, Professor Colin Archer, whom my client has never met before, and has never had as a professor, came and ask my client whether he could speak to him privately at the end of his very first clinical class with my client. When my client came to him, he asked my client, "What's going on with you and Dr. Gage?"

When my client asked Professor Colin Archer what Dr. Gage said about him? He replied, "She didn't say anything bad."

The following day, at approximately 10 a.m., in room 2111, in a private conversation with my client, Professor Archer made the following statement: "Mr. Gonel, it's not that I undervalue LPN nurses, but the RN program is a big step for you, if you want to pass the course, shut your mouth.

Although my client heeded Professor Archer's advice, and held his tongue, the school dismissed him from the RN program, as you are well aware.

Would Professor Archer state that my client's behavior was poor while in school?

After the school miscalculated my client's final grade, and failed him for approximately 2 points, my client went and implored Dr. Alvin Williams, the Executive Dean of Faculty and Academic Affairs, to grant him the 2 points that he needed, in order to avoid repeating NRS111 course. In a sarcastic smile, Dean Williams replied to my client: "How are you going to take care of my grandmother, if I give you the 2 points you asked for?" then suggested my client to file a grade appeal.

Making such a comment as the Executive Dean could be viewed by my client or other students to be offensive and humiliating and considered discriminatory.

Was Dr. Alvin Williams' statement to my client made out of "concern" about the kind of nurses the school is preparing and sending into the workplace?

After filing, and repeatedly requesting that the grade appeal meeting be held in person instead of the Zoom as the only option meeting granted to my client, on Monday, August 22, 2022, at 3:59 p.m., Dr. Gage Gale, emailed Dr. Alvin Williams, the Executive Dean of Faculty & Academic Affairs to inform him that she has terminated the grade appeal process because my client did not attend the ZOOM meeting.

Christine A. Soto, General Counsel Essex County College March 14, 2024 -Page 4-

After Dr. Gage, arbitrarily, with no regard for Essex County College, College Regulation REG 69 STUDENT GRADE APPEAL, cancelled the grade appeal process, my client was forced to hire a private attorney despite his limited resources, as there is nothing in the school handbook that states that student's appeal meetings must be held via zoom, especially if a specific request is made for the meeting to be held in person.

Following my interventions as Mr. Gonel's attorney, on or about September 26, 2022, the school was compelled to reinstate my client's grade appeal for a second time.

After reinstating the grade appeal process, my client was directed to appear in various meetings which I, the lawyer, was not allowed to attend.

During these meetings, instead of taking into account my client's complaints, and recalculating the clear mathematical error made by the two core Professor, Natalee White-Smith and Jennifer Chapman in calculating my client's grade, on Monday, October 31, at 4:55 p.m., Dr. Gale Gage emailed my client and stated that the Divisional Grade Appeal Committee met and recommended that my client be given the opportunity to amend his grade by retaking the final exam. A decision that my client rejected, due to the fact that the school refused to take into account his complaints and refused to recalculate the clear mathematical error made by the two core Professors in calculating his final grade.

As one of the members of the Divisional Grade Appeal Committee Dr. Danville was well aware of my client's decision.

However, after the school, on Friday March 24, 2023, emailed my client a one paragraph letter, simply stating that after careful review, the committee voted unanimously not to change my client's grade without any justification in the letter explaining why, Dr. Gennevieve Danville, one of the members of the divisional grade appeal committee, as mentioned earlier, made the following statement:

"It's almost an insult to them, the grievance committee because the school did not acknowledge their decision since the Plaintiff was not at fault." And added: "...So whatever the grievance committee said Doesn't it matter?" And continue to say: "if the school knew they wouldn't even listen to the grievance committee, why even bring the matter to them."

Based on the number of syllabi that were given to my client, and presented at the grade appeal meeting, which made it impossible for the two core Professors, Natalee Write-Smith and Jennifer Chapman, and the committee grade appeal to discern the mathematical error made in calculating my client's grade, as a member of the Divisional Grade Appeal Committee, Dr. Danville stated:

Christine A. Soto, General Counsel Essex County College March 14, 2024 -Page 5-

"There is no concrete argument; because the student got one syllabus from Dr., Gage, two syllabi from professor Natalee, and one syllabus from Professor Chapman.....Right there that was ground to throw the case out in a court."

After holding my client in the dark for months, the school decided to expel him from the nursing program on Friday, March 24, 2023. Knowing the problems caused by the number of syllabi emailed or handed to him, would Dr. Danville agree that the school could have had handled this situation differently?

After the school, arbitrarily, expelled my client from the nursing program, in a private meeting between Dr. Eunice Kamunge, one of the members of the College Wide Grade Appeal, Dr. Gennevieve Danville_ one of the members of the Divisional Grade Appeal Committee, and my client, Dr. Kamunge avowed to Dr. Danville that she was invited or Dr. Alvin Williams, the Executive Dean of Faculty and Academic Affairs, invited her to the college-wide appeals meeting only 20 minutes before the meeting starts. She also stated that she did not know what was going on during the meeting because the attendees were not explicit.

How did the College Wide Grade Appeal committee or the school justify the final decision not to change my client's grade when members at the meeting did not know what was going on, or the attendees were not explicit, as stated Dr. Kamunge?

Furthermore, in an attempt to re-count one of four miscalculations made by Professor Natalee Write-Smith and Professor Jennifer Chapman in calculating my client's final score, the school's SGA (Student Government Association) found different results compared to those of teachers during the College Wide Grade Appeal. (See the school's SGA attachment)

During this private meeting, Dr. Danville made the following statement:

"There is no concrete argument; because the student got one syllabus from Dr, Gage, two syllabi from professor Natalee, and one syllabus from Professor Chapman....Right there that was ground to throw the case out in a court."

Would Dr. Kamunge agree that the four syllabi given to my client be the cause of all this confusion?

<u>Step 5 Part C</u> in Essex County College, College Regulation REG 6-9 STUDENT GRADE APPEAL, highlights the deferent members who must be present at the College Wide Grade Appeal Committee meeting.

Christine A. Soto, General Counsel Essex County College March 14, 2024 -Page 6-

The College Regulation REG 6-9 STUDENT GRADE APPEAL recommends that one faculty member from each of the academic divisions should be present during that meeting.

However, neither Dr. Keith Kirkland, the Dean of Student Affairs, nor his designee, were among the faculty members who were not present at the college Wide Grade Appeal Committee meeting.

As they say in a campaign trail, every vote counts. Would Dr. Kirkland agree that his presence or that of someone designated by his office at the meeting could have impacted the school's final decision?

Prior to the initial grade appeal process, Dr. Alvin Williams, the Executive Dean of Faculty and Academic Affairs, as previously mentioned, aver to my client that "the school has resources or ways to track the original syllabus sent to students." This statement was made when my client raised with Dr. Williams the issue of different versions of syllabi being given to him for the same course.

In addition, when my client told Dr. Williams about the additional 3 points that he has earned for reaching level 2 on the ATI proctored exam for mental health, as indicated on one of the syllabi emailed to him, but the two core teachers, Natalee White-Smith and Jennifer Chapman, denied these points, Dean Williams stated: "Why take an exam or do an assignment if it is for no points?"

Knowing the issues raised by the number of syllabi emailed or handed to my client, as the Executive Dean and Chief Information Officer (CIO), was Mr. Mohamed Seddiki able to retrieve the original documents or syllabi sent to my client after the school, particularly Mr. Alvin Williams contacted him regarding this matter?

Please be further advised that Mr. Gonel is requesting a response from the school to the summary set forth above.

Thank you for your attention to this matter.

Very truly yours,

DANIEL DUGAN

EXHIBIT "S"

FedEx Advanced Shipment Tracking and Proof of Delivery_ March 15, 2024 **DELIVERED**

Friday

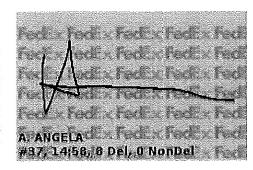
3/15/24 at 2:53 PM

Signed for by: A.ANGELA

DELIVERY STATUS

Delivered

口 missing



Report package

FROM

Noemi Berrios Stewart Karlin or Charles Baldour

> 1 1 1 John Street 22nd Floor New York, NY US 10038 2127929670

> > Label Created

3/14/24 4:07 PM WE HAVE YOUR PACKAGE NEW YORK, NY 3/14/24 6:52 PM

ON THE WAY NEWARK, NJ 3/15/24 5:40 AM

OUT FOR DELIVERY

https://www.e5ec.vom/e050rastrig/ytrksss-7755906563984164ual=2466984003/93/21522638-80493/2472.91 203 PageID: PM FedEx Advanced Shipment Tracking 197

NEWARK, NJ 3/15/24 8:01 AM



Christine A. Soto

Essex County College

303 University Avenue NEWARK, NJ US 07102

000000000

Delivered

3/15/24 at 2:53 PM

View travel history

Want updates on this shipment? Enter your email and we will do the rest! TRACKING NUMBER 775551722635

DELIVERED TO Shipping/Receiving

SHIP DATE 0 3/14/24

STANDARD TRANSITO 3/18/24 before 5:00 PM

DELIVERED 3/15/24 at 2:53 PM

Services

EXHIBIT "T"

FedEx Advanced Shipment Tracking and Proof of Delivery_April 23, 2024

Dear Customer,

The following is the proof-of-delivery for tracking number: 776058002642

Delivery Information:

Delivered Shipping/Receiving Status: Delivered To:

303 UNIVERSITY AVE Signed for by: T.CELABO **Delivery Location:**

Service type: FedEx Standard Overnight

Deliver Weekday; Direct Signature Required Special Handling: NEWARK, NJ, 07102

> Delivery date: Apr 23, 2024 13:52

Shipping Information:

Tracking number: 776058002642 Ship Date: Apr 22, 2024

> Weight: 1.0 LB/0.45 KG

Recipient: Christine A. Soto, General Counsel, Essex County College 303 University Ave NEWARK, NJ, US, 07102

Shipper: Stewart Karlin or Charles Baldour, 111 John Street 22nd Floor New York, NY, US, 10038



EXHIBIT "U"

Cease and Desist Letter from CARMAGNOLA & RITARDI, LLC, Attorneys at Law to Plaintiff's Counsel



CARMAGNOLA & RITARDI, LLC ATTORNEYS AT LAW

WASHINGTON STREET - MORRISTOWN, NJ 07960 T. 973.267.4445 W.CR-LAW.NET F. 973.267.4456

SEAN P. JOYCE sjoyce@cr-law.net

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May 2, 2024

Via E-mail (dan@stewartkarlin.com) Daniel

Dugan, Esq.
Stewart Lee Karlin Law Group, P.C.
111 John Street, 22nd Floor
New York, New York 10038

Re: Alandre Gonel

Dear Mr. Dugan:

Please be advised that our office has been retained to represent Essex County College (hereinafter "ECC") in response to issues raised in your March 5, 2024, March 14, 2024 and April 22, 2024 correspondence to Christine Soto. Moving forward please direct all correspondence regarding Mr. Gonel's association with the ECC to my office and cease contacting ECC directly. Kindly also direct your client from contacting anyone at ECC.

ECC denies any allegations that Mr. Gonel's "rights were violated in connection with his dismissal." Indeed, ECC already addressed the issues raised by Mr. Gonel in a lengthy Grade Appeal that took place in 2022 and 2023 pursuant to ECC policy. As Mr. Gonel is aware, ECC issued its **final** decision on his Grade Appeal on March 24, 2023 and ECC will not revisit that decision.

While there is no basis for any suit against ECC, please consider this letter a demand that Mr. Gonel and all persons or entities acting by or on his behalf **preserve** and issue a litigation hold regarding all relevant documents, including but not limited to, documents referring or relating to his relationship with ECC, documents relating to any business or personal communications created or received by Mr. Gonel relating to his association with and eventual dismissal from the ECC program, any documents regarding his Grade Appeal and any documents referenced in any letters you or your firm have sent to ECC. The destruction of such evidence is prohibited by law.

We believe evidence exists in Mr. Gonel's files and computer and e-data systems. Please ensure that all relevant documents, files and e-data, including, but not limited to, minutes, e-mails,

CARMAGNOLA & RITARDI, LLC

Daniel Dugan, Esq. May 2, 2024 Page 2

pagers, cell phones, voicemails, PDAs, video recorders, instant messages, notepads, electronic notebooks, and computer caches be preserved until we have an opportunity to inspect these documents and e-data.

Should you have any questions regarding the above, please feel free to contact me.

Very truly yours,

CARMAGNOLA & RITARDI, LLC

/s/ Sean P. Joyce SEAN P. JOYCE A Member of the Firm

cc: Essex County College